

# Workforce Investment Act Job Training Automation System Client Forms Handbook

Prepared By Workforce Investment Division March 2005

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# Workforce Investment Act Job Training Automation System Client Forms Handbook

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Chapter

1

#### Introduction

The Job Training Automation (JTA) system includes a module to track clients who are participating in the California Workforce Investment Act (WIA) program. This module allows the data entry into client forms including an application, an enrollment form, a goal form, an exit form, and a follow-up contact information form. Also, the module provides the ability to load data to the JTA system from a case management system and to print various client-tracking reports.

The Job Training Automation System Workforce Investment Act Client Forms Handbook is designed to provide the Management Information System (MIS) administrators, case managers and data key entry staff, guidance to WIA client forms completion and data key entry into the JTA System. Many of the procedures covered in this handbook are basic daily functions and are provided for new staff just learning the job. However, the handbook should serve as a reference manual for even the most experienced local area staff.

There are additional reference handbooks or guides for the JTA system that cover additional topics: the JTA System MIS Guide, the Eligible Training Provider List (ETPL) User Guide, the ETPL Forms Handbook, the WIA Participant Reporting Handbook, and the Stateside Expenditure Reporting Guide. A copy of these handbooks can be found on our Web site at <a href="https://www.edd.ca.gov/wiarep/wdmisar.htm">www.edd.ca.gov/wiarep/wdmisar.htm</a>.

#### **Client Forms Document Flow**

This handbook provides instructions for completing the various WIA client forms and inputting the data into the JTA System. The various WIA client forms are presented in this handbook in the order that they are normally required. A brief description and chart are provided here to describe the appropriate WIA client forms flow.

#### **Document Flow**

The WIA subgrantee will complete an application form to gather demographic and eligibility data when a client initially applies for the WIA program. Once the client has been determined eligible for the program and services are provided, an enrollment should be completed and entered into JTA. A client will have only one enrollment/registration for each WIA program funding source (grant code). An enrollment/registration for WIA services will be completed as described in Chapter 2, Table 1, Proposed Enrollment/Registration WIA for Services. The enrollment/registration form is used to track the client's training activities and/or services received throughout participation.

If the client is an in-school youth or an appropriately assessed out-of-school youth, at least one goal per 12-month period must be set to ensure attainment of basic skills, for example reading comprehension, math computation, listening, writing, and speaking for example. The goals set will be entered into the JTA system. A maximum of three primary reportable goals per program year may be entered for performance purposes.

Exit data should be provided once the client completes his or her participation in the WIA program and all other related services. This will eliminate Automatic State Exits of clients due to 150 days of inactivity. The client is no longer a client when all enrollment activities are closed, there are no open enrollments, and the client is exited. Documentation of supportive Post Exit Services, such as child/dependent care, bus passes, and job shadowing for example, is optional for adults but required for a minimum of 12-months for youth.

The follow-up contact information form is required for collecting information after the client exits. This form is also used to collect diplomas/certificates attained and supplemental employment data. This follow-up process is critical to performance management. For youth, follow-up is required (Title 20 of the Code of Federal Regulations, Part 664.450 (b)) for 12-months after exit. For adults and dislocated workers, supportive services must be available, as appropriate, after entry into unsubsidized employment.

#### **Client Forms Flow Chart WIA Application Form** (EWIR) • Determines Eligibility • One per client (per entity)\* Youth 14-18 **WIA Enrollment/** WIA Enrollment/ Registration Form (EWIE) Registration Form (EWIE) • Enrollment at receipt of · Enrollment at receipt of services services • One per funding source • One per funding source (i.e. grant code) (i.e. grant code) WIA Goals Form (EWIG) Mandatory only for Youth 14 – 18 • At Least one every 12 months of participation **WIA Exit Form** (EWIT) One per application (All activities on all enrollments must have completion code) **WIA Follow-Up Information** Form (EWIF) 30-day, 60-day, 1st Qtr, 2nd Qtr, 3rd Qtr, 4th Qtr after Exit

www.edd.ca.gov/wiarep/wiab03-7.pdf \*

#### **Logging Onto JTA**

In order to log onto JTA, you will need a JTA Logon ID and a JTA Logon password. The JTA Local Automation Unit, Workforce Investment Division (WID), will issue JTA Logon IDs to the timeshare JTA system users upon request. The JTA Logon ID is different from the login. The Logon ID is an individual user ID that is entered at the login prompt (login:) during the process of accessing JTA. Type in your JTA Logon ID in lowercase letters only at the login prompt (login:) and press <Enter>. The system will then prompt you to enter your password.

Please refer to your JTA MIS Administrator to coordinate the issuance of a Logon ID.

SECURITY REMINDER: A Logon ID is not to be used by other individuals. Each JTA user will be assigned a unique Logon ID and they should secure their password.

#### **The Logon Process**

Once your computer has connected to the JTA system (whether by modem, router or other connection), the following screen will appear:

telnet (f10c01)

#### **WARNING**

Any person who, without authorization, accesses or attempts to access, or who tampers, interferes or damages any computer network, computer system, computer program or software or computer data maintained by the Health & Human Services Data Center, is subject to civil and/or criminal prosecution under all applicable state and federal laws.

login:

At the login prompt (login:), type in your JTA Logon ID in lowercase letters only and press **<Enter>** or **<Return>**. The system will then prompt you to enter your password.

telnet (f10c01)

#### WARNING

Any person who, without authorization, accesses or attempts to access, or who tampers, interferes or damages any computer network, computer system, computer program or software or computer data maintained by the Health & Human Services Data Center, is subject to civil and/or criminal prosecution under all applicable state and federal laws.

login: abcwpooh

abcwpooh's Password:

Type in your password and press **<Enter>**. Your password will not appear on the screen as you type. Once you have entered your password successfully, the last unsuccessful login and last login records will be displayed followed by one of two possible lines:

TERM = (vt220)

or

TERM = (dumb)

The "TERM" in both examples is referring to the terminal that is being utilized. If "TERM = (vt220)" is displayed (the first example), press **<Enter>**. However, if "TERM = (dumb)" is displayed (the second example), type in vt220 and press **<Enter>**. You are now at the Health and Human Services Data Center (HHSDC) "Welcome Screen." At the bottom of the screen the cursor will be flashing at the end of what is know as the "\$ prompt " or "command line" (/home/ed/jta/abccpooh 152\$). At the flashing cursor (\$ prompt) type in "menu" in lower case and press **<Enter>**. You are now at the main menu.

The JTA menu that was built for your logon will be displayed automatically. The WIA module has three sub-menus and will appear as part of this main menu. The following chart contains items that may appear on your menu:

1	MWTW	Welfare to Work
2	MWIA	Workforce Investment Act
3	MSM	System Set-ups and Management
4	MCM	Cash Management
5	MCR	Canned Report
6	MCAR	Custom Ace Reports
7	MSQLAE	SQL Assist for ETPL
8	MJTPA	Old JTPA Screens

The WIA MWIA module will have five sub-menus:

1	MWIS	Workforce Investment Act Screens
2	MWIR	Workforce Investment Act Reports
3	MWIL	Workforce Investment Act Loads/Extracts
4	MWPS	Workforce Investment Act Performance
5	MWTP	Employment Training Provider Screens

#### **Logging Off JTA**

To exit the JTA system, select the **<F3>** key repeatedly until the \$ prompt is displayed (i.e. /home/ed/jta/abccpooh 207\$). When the "\$ prompt" is displayed, type "exit" in lower case, press **<Enter>**. The following message "This session is no longer connected." will be displayed.

#### **Function Keys**

In the prior section, you will notice that the <F3> key is mentioned. This key is one of the function keys that must be mapped on your keyboard prior to using the JTA system. These function keys are located at the top line of keys on your keyboard. The standard keyboard will include a minimum of twelve function keys, <F1> through <F12>, although some keyboards may contain the complete set of function keys, including <F11> through <F20>.

When using the standard keyboard containing only function keys <F1> through <F12>; selecting the shift key and one of the existing function keys accesses function keys <F11> through <F20>. For example, by holding down the shift key and pressing <F1>, the JTA system will recognize the command for function key <F11>. Of course, if your keyboard already contains a <F11> key, there will not be a need to utilize the shift key (simply select the <F11> key).

The following chart contains the basic purpose behind each function key; however, some function keys will not be activated on every menu option. Note that the function key **<F10>** provides an on-line type of help for these functions.

#### **Function Keys For Workforce Investment Act Users**

1								
<f1></f1>	Help	Calls a scrolling window with a choice list showing help for the field in which cursor is placed. For example, with the cursor on the ethnicity field, <f1> will show all available ethnicity codes.</f1>						
<f2></f2>	Clear	Clears all fields of the current function.						
<f3></f3>	Exit	Exits from the current screen to the previous menu. May not be used if entry has been made on the screen without filing the data or if changes have been entered but not filed. To exit without saving changes, use <f2> to clear then <f3> to exit.</f3></f2>						
<f4></f4>	Go То	Used to move cursor from present field to another field within a form. Press <b><f4></f4></b> and enter field number or text to match.						
<f5></f5>	File	Writes the record to the database, assuming all edits and other constraints have been met.						
<f6></f6>	Delete	Deletes a record from the database, assuming that no constraints exist.						
<f7></f7>	Previous Screen	In a multiple screen process, returns to the previous screen.						
<f8></f8>	Next Screen	In a multiple screen process, moves cursor to the next screen.						
<f9></f9>	Next	Moves cursor up to the upper left corner of the screen and prompts for keyword of the next process user wishes to call. With this function, users may move to various processes without using the menus.						
<f10></f10>	Function Key Menu	Displays a window of Function keys and allows user to scroll through and select desired function. Using <f10> again closes the window.</f10>						
<f11> or SHIFT <f1></f1></f11>	Previous Logical Process	Calls the program defined in the menu setup as the most logical previous process, after meeting any filing requirements on the current screen. This flow may be changed using the Enter Menu Group Descriptions (EMGD) screen.						
<f12> or SHIFT <f2></f2></f12>	Next Logical Process	Calls the program defined in the menu setup as the logical next process, after meeting any filing requirements on the current screen. This flow may be changed using EMGD.						

#### **Function Keys For Workforce Investment Act Users (Continued)**

SHIFT <f3></f3>	Exit to Main	Exits directly to the Main Menu.
SHIFT <f4></f4>	Conditional Operators Help	Displays a help window for conditional operators, i.e. > (greater than), < (less than), %. Only available on print report screens where choices can be made regarding grant codes, agency codes, etc.
SHIFT <f5></f5>	Redraw Screen	Redraws the screen, including any information that was entered on the screen.
SHIFT <f6></f6>	Switch/QCM	(This key has no functionality in WIA)
SHIFT <f7></f7>	Client History	When used on an entry screen, displays client history for the client whose data is on the screen.
SHIFT <f8></f8>	Clear Field	Clears field from which the function was called, and in some cases, the related fields.
SHIFT <f9></f9>	Restore	Restores and displays original data to all fields after data is changed but not filed.
SHIFT <f10></f10>	Print Screen	Prints the terminal/monitor screen display.

Chapter

2

### **Enter WIA Application Form (EWIR)**

The Enter Workforce Investment Act (WIA) Application Form (EWIR) is used to record basic individual characteristics and to record this information into the Job Training Automation (JTA) system. It is also used to determine eligibility as required by the WIA program.

The Department of Labor issued Training and Employment Guidance Letter (TEGL) 7-99, dated March 3, 2000, for the purpose of providing technical guidance for entities to implement the core and customer satisfaction performance measures and calculate performance levels required under WIA. A matrix from that guidance is included here to help determine when a person should be enrolled/registered into WIA. Once a client's eligibility for a WIA-funded program has been established by the data collected on the EWIR, the Local Workforce Investment Area (LWIA) will use the WIA Enrollment/Registration form (EWIE) to enroll/register the individual. Individuals who are primarily seeking information and do not require direct, one-on-one staff assistance, do not need to be enrolled/registered. However, LWIAs can use the "Universal Access Only" option to collect limited client information for individuals not requiring direct one-on-one staff assistance or enrollment/registration. Table 2, Universal Access Only Fields, is included in this chapter to view the required fields for both the EWIR paper form and electronic filing of a "Universal Access Only" application in the JTA system.

A client may have only one active application form on file during an enrollment cycle. While only one application is active at any one time, more than one enrollment may be linked to that application. During the entry of an application form, the JTA system will use the client's social security number to determine if an active application and/or enrollment exists in the system indicating that the client has not been exited.

This Application form should be distinguished from the Enrollment/Registration form. The term *Application* will be used to refer to the eligibility determination and characteristics gathering process and *Enrollment/Registration* will be used to refer to the time at which staff assisted core services begin.

Table 1: Proposed Enrollment/Registration for WIA Services <sup>1</sup>

Core Services - Self-Service Informational (no registration required)	WIA Core Services (registration required)	WIA Intensive Services (registration required)	WIA Training Services (registration required)			
Determination of eligibility to receive assistance under Title IB	Staff assisted job search & placement assistance, including career counseling	Comprehensive & specialized assessment, such as diagnostic testing & interviewing	Occupational skills training			
Outreach, intake (which may include WPRS referrals) & orientation to the One-Stop center	Follow-up services, including counseling regarding the workplace	Full development of individual employment plan (IEP)	On the job training			
Initial assessment of skill levels, aptitudes, abilities & need for supportive services	Staff assisted job referrals (such as testing & background checks)	Group counseling	Workplace training & cooperative education programs			
Employment statistics information including job vacancy listings, job skill requirements for job listings, & info. on demand occupations	Staff assisted job development (working with employer & job seeker)	Individual counseling & career planning	Private sector training programs			

<sup>&</sup>lt;sup>1</sup> This table has been extracted from the Department of Labor, TEGL 7-99, and includes no State imposed requirements.

**Table 1: Proposed Enrollment/Registration for WIA Services** (Continued)

Core Services - Self-Service Informational (no registration required)	WIA Core Services (registration required)	WIA Intensive Services (registration required)	WIA Training Services (registration required)			
Performance info. on eligible training providers	Staff assisted workshops and job clubs	Case management	Skill upgrading & retraining			
Performance info. on the local One- Stop delivery system		Short-term pre- vocational services	Entrepreneurial training			
Information on supportive services and referral to supportive services		Follow-up services, including counseling for registrants (those previously receiving intensive/training services) after entering employment	Job readiness training			
Information regarding filing for Unemployment Insurance compensation			Adult education and literacy activities in combination with training			
Assistance in establishing eligibility for other training and education programs			Customized training			
Resource room usage						

Table 1: Proposed Enrollment/Registration for WIA Services (Continued)

Core Services - Self-Service Informational (no registration required)	WIA Core Services (registration required)	WIA Intensive Services (registration required)	WIA Training Services (registration required)
Internet browsing (job, information and training searches)			
Internet accounts (Career Kit, Personnel Kit)			
Initial development of employment plan (IEP)			
Talent referrals (informational, e.g., talent scouts, labor exchange referrals of resumes without further screening)			
Workshops and job clubs			

# Field Requirements for Filing a "Universal Access Only" Application Form

A "Universal Access Only" application does not need to be entered completely before it may be filed. Only the following fields are required to file this type of application:

**Table 2: Universal Access Only Fields** 

Field #	Field Name	Field #	Field Name
00	Application Number	04	Application Date
02	Social Security Number	05	Last Name
03	Universal Access Only	06	First Name / Middle Initial



# WORKFORCE INVESTMENT ACT APPLICATION

Sub	ograntee Name
00	Application Number
01	Agency Code
02	Social Security Number

03	, , , , , , , , , , , , , , , , , , , ,					05 Last Name						06 First Name / Middle Initial						
1	1 Yes 2 No																	
-	07 Street Address (Residence)				City /	City / State (Residence)						08 ZIP Residence)			09 F	Phone (Residence)		
0,	or Street Address (Residence)					Oity /	Juic	(Itesiaenee	'					"	Zii Nosideli	00)	(	)
10	Mail Street					Mail (	City / S	State						11	Mail ZIP		12 N	Message Phone
																	(	)
13	(Optional) 1	Eligi Non- Ineli	Citizer ble ·citizen	n ı	Alien Doc #		16 1 2	Gender Female Male	17	Birth	date	18	Age	19 1 2 3	Assessed Yes, WIA Assessed Yes, Non-WIA Assessed Not Assessed		1 Y 2 N 3 E	Selective Service Registration Yes, Registered No, Not Registered Exempt From Registration Not Required
21	Race (select on	ne or m	ore)	Conc	current Participa	tion						42	Disab	led		47	Pregi	nant / Parenting Youth
AA					Adult Education				1 \	Yes	2 No	1	Yes, N			1	Yes	
AB AC					Job Corps Farmworker Prog	ram				Yes	2 No	2	Yes, S No	Substa	intial	2	No Not A	Applicable
AD					Native American					Yes Yes	2 No 2 No	43	Limite	d Fn	nlich	48		h Needing Assistance
AE					Veterans' Workfo		stment	Programs	1 \	Yes	2 No	1	Yes	u LII	giisii	70		itional Barriers)
AF AG	Hawaiian Japanese				Veterans' DVOP / Trade Adjustment					Yes Yes	2 No 2 No	2	No			1	Yes	
АН	Korean			29	NAFTA-ŤAA					res Yes	2 No	44	Subst	ance	Abuse	2	No Not A	Innliaabla
AI AJ	Laotian Samoan				Vocational Educa Vocational Rehab		ion 1 Yes 2 No 1 Yes					9				Applicable		
AK				-	Wagner-Peyser	milation				Yes Yes	2 No 2 No	2	No	CL:II	D-6-11	<b>49</b> 1	Yes	away Youth
AL		ific Isla	ınd		WtW-Participant	O A A \			1 \	Yes	2 No	<b>45</b>	Yes	SKIII	s Deficient	2	No	
AO BL		panic			Title V Activities ( Comm Srvc Blk G		n			Yes Yes	2 No 2 No	2	No			9	Not A	Applicable
Н	Hispanic			36 I	HUD Pgm	J				Yes	2 No	9	Not Ap	plica	ble	50		er Child
NA	American Indian Native	/Alaska	an		Other non-WIA Pe Rapid Response	gm				Yes	2 No					1 2	Yes No	
WH	White – Not Hisp	panic				– Additio	- Additional Assistance 1 Yes 2 No 46 Offence 1 Yes 2 No 1 Yes					ider 9				Applicable		
					TANF Food Stomp Troin	ina Droc	rom		1 \	Yes	2 No	2	No	51				ly TANF
				41	Food Stamp Trair	iing Program			1 \	1 705 7 100 1			pplicable 1			Yes		
	F " 01			D04	Te4 = 11 4		1	F		1 -/	Ni is a sec	<u> </u>	1	NI.		2	No .	
<b>52</b>	Family GA Yes		<b>Family</b> Yes	RCA	54 Family S	51	55	Family Foo Stamps	oa	56	Number Family	ın	57		mber of pendents	<b>58</b>		ily Status nt in one-parent family
2	No		No		2 No		1	Yes, Eligibl	е		. ,				ge 18	2		nt in two-parent family
							2	Yes, Recei	/ing							3		r family member
							3	No								4 5		a family member
59	Family Income		60	Low Inco	nmo	61 7	LVNE	Exhaustee	61	) Ho	meless			63	Poor Work H			eported  4 Unemployment
37	(Prior 6 mos)			Yes	nne		es	LAHaustee	1					1	Yes	15101	y   0	Insurance
			2	No		2 1	No		2	2 No				2	No			1 Yes, UI Claimant
									9	9 No	t Applicable	9						<ul><li>Yes, UI Exhausted</li><li>No</li></ul>
/-	Votoron Ctater			Dioghts 1	Votoron	(7 )	lot	n Consust's		ים ה	oontle: Ce	orct.		/^	Compains	-to		
<b>65</b>	65 Veteran Status			veteran		/etera Date	n Separation	n   68		cently Sep teran	arate	u	<b>69</b>	Campaign Ve Vietnam-era	etera	"   "	<ol> <li>Spouse of Qualifying Veteran</li> </ol>	
2	Yes, > 180 days				cial disabled	1	Date			1 Ye				2 Other Campaign				1 Yes
3	No		3	No					2	2 No				,	Veteran			2 No
1						1								3	No			



# WORKFORCE INVESTMENT ACT APPLICATION

Subgrantee Name	
Application Number	
Agency Code	
Social Security Number	

Las	st Name				First I	Name / Mic	ldle Initi	ial							
71	Highest Grade		ucation Sta				73	Read	ding Grade	74	Reading Score	e 75 R	eading Tes	t 76	Reading Version
	Completed		ıdent, H.S. o												
				ing post H.S.											
				H.S. dropout											
				H.S. grad, emplo											
		5 Ou	t-of-School,	H.S. grad, no em	ployme	nt difficulty									
77	Math Grade			78 Math Sco	re				79 Math T	est			80 Math	Version	1
81	Pell Grant Recipi	ent	82 Pell (	Grant School Ye	ar 8	3 Labor	Force	8	4 Weeks N	ot Em	ployed Last	85 Hourl	y Wage	86	Referred by WPRS
1	Yes		Awar	d Amount		Status			26 Weeks				, .,		(Profiling)
2	No, Applied but de	enied				1 Employ	/ed							1	Yes
3	No, Application Pe					2 Not em								2	No
4	Application not sul	•													
87	Dislocated Worke	er	ı	88 Dis	locatio	n Date	89 Jol	b Co	de at Disloca	ation	90 Job Tit	le			
1	Terminated or Laid	d off													
2	Received Notice o	of Layoff													
3	Long Term Unemp	oloyed													
4	Self Employed	-													
5	Displaced Homem	naker													
9	Not Applicable														
91	Dislocation Indus	stry Code		enure at Employ		93 Em	oloyer N	lumb	er		94 Employ	yer Name			
			ט	islocation (mon	ths)										
Em	ployer Address					Employe	r City				Employer S	tate / ZIP	Em	ployer 1	Геlephone
													(	)	
95	Eligibility								ıth (age 14 –						partment of Labor
Α	Adult WIA			(age 14 _ 18)					ıth (age 19 –	21)	veterans tra	ining prog	ram (Public	Law 10	7-288)?
В	Adult Low Income		G Youth	(age 19 – 21)		N Lor	ng Term	Uner	mployed		Y Yes				
D	Dislocated Worker	r	H Vetera	n Grant		X No	Eligible				N No				
Sig	nature of Interview	ver								96 li	nterviewer ID		Date		
Sig	nature of Reviewe	r								97 F	Reviewer ID		Date		

Client Certification: My signature below indicates that I have been informed of and understand the information contained on this form. I certify under penalty of perjury that all of the above information is true and complete. I agree that any information I have supplied is subject to verification. I understand that falsification of any item is grounds for termination from the Workforce Investment Act program and may result in action to recover any moneys paid to me while participating.

Signature of Client	Date	Signature of Parent, Guardian or Responsible Adult	Date
Remarks:	•		



#### Field Requirements for Filing an Application Form

An application does not need to be entered completely before it may be filed. Partial applications can be filed, but an enrollment cannot be entered against an application until it has been entered completely and error free. Refer to individual fields to see if the field is required.

Note: When all required fields have been entered, you may use the <F5> <File> key to file the record. If there are errors or missing data in the record, you will be prompted to go to the error to correct it. This must be done prior to entering any enrollments for the client. When the form has been entered with no errors or missing data, "YES" will appear in the field EWIR Complete. An incomplete form may be filed and updated at a later time, but no enrollments will be allowed until EWIR Complete = "YES"

If you requested an auto-generated application number, the number will be generated at this time. This number should be recorded on the form, as it will be used on future records.

#### **Sample Entry Screens**

The mnemonic for accessing the entry data screen is located in the MWIS Workforce Investment Act Screens menu option within the MWIA Workforce Investment Act menu option. The fastest method to activate the program is by entering the program's mnemonic "EWIR" anywhere within the menu environment. After entering the mnemonic, the following data entry screen is displayed:

#### **Enter WIA Application Screen—Screen 1**

EWIR	Enter WIA Application Form	ADD
00 App Num 01 Agcy Code 02 SSN 03 Univ Access 2 04 App Date / / 05 Last Name 06 First MI 07 Strt Adrs City	17 Birthdate 18 Age 19 Assessed 20 Selective Srvc Reg 21 Race 22 Adult Education 23 Job Corps 24 Farmworker Program 25 Native American Pgm	
St 08 ZIP - 09 Phone 10 Mail Strt     Mail City     Mail St 11 Mail Zip - 12 Msg Phone 13 GEO 14 Citizen	26 Vet Wrkfrce Inv Pgm 27 Veterans / DVOP LVR 28 Trade Adjustment Act 29 NAFTAA-TAA 30 Vocational Education 31 Vocational Rehab 32 Wagner-Peyser 33 WTW Participant 34 Title V Actvy (OAA) 35 Comm Srvc Blk Grnt	
15 Alien Doc 16 Gender	36 HUD Pgm	

#### Enter WIA Application Screen—Screen 2

EW	'IR	Enter WIA Applic	ation Form		ADD
37 38	Other Non-WIA Pgm Rapid Response		Number of Dependents Family Status		
39 40	Rapid Resp Addl Asst TANF		Family Inc (Prior 6 mos) Low Income	0	
41	Food Stamp Training Pgr	n 61	TANF Exhaustee		
42 43	Disabled Limited English	_	Homeless Poor Work History		
44	Substance Abuse Basic Skills Defic		Unemployment Insurance Veteran Status		
46		66			
47 48	Pregnant / Parenting You Youth Needing Addtl		Veteran Sep Date / Recent Sep Vet	/	
49	Runaway Youth	69	Campaign Veteran		
50 51	Foster Child Family TANF		Spouse of Qualifying Vet 2 Highest Grade Complete		
52	Family GA	72	Education Status		
	Family RCA Family SSI		Reading Grade Reading Score		
55	Family Food Stamps	75	Reading Test		
56	Number in Family	76	Read Version		

#### Enter WIA Application Screen—Screen 3

EWIR	Enter WIA Application	on Form	ADD
77 Math Grade 78 Math Score 79 Math Test 80 Math Version 81 Pell Grant Recipient 82 Pell Grant Amount 83 Labor Force Status 84 Wks Not Empld Last 26 85 Hourly Wage 86 Referred by WPRS 87 Dislocated Worker 88 Disloc Date 9 Job Cd at Disloc 90 Job Title 91 Disloc Industry Code 92 Tenure Dislocation 93 Employer Number	Er Er Er 0.00 95 Eli 96 Int 97 Re	mp Name mp Address mp City mp St / ZIP - mp Telephone igibility terviewer ID eviewer ID WIR Complete NO	

#### **Line Item Instructions**

The following are line item instructions for the Application (EWIR) form. These instructions are intended to assist you with completion and entry of this form. These instructions also provide information on using the Job Training Automation system.

	Subgrantee Name (Optional)	Record the name of the subgrantee.
00	Application	This can be preprinted on the form.
	Number	The application number is a required entry. The application number may be auto-generated by the JTA system.
01	Agency Code (Optional)	Record the code that has been assigned by the subgrantee to the service provider that conducts the initial intake interview.
02	Social Security Number	Record the client's social security number (SSN). A pseudo-SSN may be assigned during intake, however, Federal policy requires that a valid SSN for such an individual <i>must</i> be obtained and recorded prior to the first transmittal of an individual's data.
03	Universal Access	Select the appropriate number.
	Only	<ul> <li>Yes—Send this client, who is NOT enrolled in WIA, to the State. The State will match this non-registered client's social security number to the Unemployment Insurance (UI) Base Wage File to determine quarterly earnings information. This client will not count in performance measurements. Only LWIAs can receive the earnings information on universal access clients.</li> <li>No—Non-LWIAs must record "No."</li> </ul>
04	Application Date	Record the application date (MM/DD/YYYY). This is the date the form is completed to determine the client's
		eligibility for the program.
		Enter the date of the application. Enter in the format of MM/DD/YY. The system will convert the date from MM/DD/YY format to MM/DD/YYYY for display.
05	Last Name	Record the client's last name.
		If the client has a previous application on file and is using a different last name, you will be asked if the client's last name should be changed.

06	First Name / Middle Initial	Record the client's first name and middle initial if provided.  If the client has a previous application on file and is using a different first name, you will be asked if the client's first name should be changed.
07	Street Address (Residence)	Record the street address where the client resides, including apartment numbers and/or letters. Post office box and/or RFD numbers are acceptable for homeless individuals and for those who live in rural areas.
	City / State	Record the city and state of the client's residence.
	(Residence)	If this item is left blank, the mailing address, city and state (Field 10) must be entered.
08	ZIP (Residence)	Record the ZIP code for the client's residence. This may be a city outside of the area, and/or outside of the state.
		A lookup table will appear with the city for that ZIP code. If the correct city is displayed, use your arrow key to highlight the city, press <b><enter></enter></b> , and the city and state will be filled in automatically.
		If the correct city is not displayed, select the "edit" option. This will allow you to enter the new city for the selected ZIP code.
		For a country or zip code outside of the US, enter "00000" in the ZIP field and press <b><enter></enter></b> . An option box will appear. Select "OUTSIDE THE USA" and press <b><enter></enter></b> . The City/State field will auto-populate with "OUTSIDE THE USA" and "XX" respectively.
09	Phone (Residence) (Optional)	Record the client's residence phone number, including the area code. This item may be left blank. If the client does not have a residence phone number, record a phone number in Message Phone, Field 12, where the client can receive messages, or record a number here where the client may be reached.
10	Mail Street	Record the client's mailing address if different from the residence address.
		The mailing address must be entered if the residence address (Field 7) has been left blank.
	Mail City / State	Record the city and state of the client's mailing address if different from the residence address (Field 7).

11 Mail ZIP	Record the ZIP code for the client's mailing address. This
II Wan Zii	may be a city outside of the area, and/or outside of the state.
	For a country or zip code outside of the US, enter "00000" in the ZIP field and press <enter>. An option box will appear. Select "OUTSIDE THE USA" and press <enter>. The City/State field will auto- populate with "OUTSIDE THE USA" and "XX" respectively.</enter></enter>
12 Message Phone (Optional)	Record a phone number including the area code, where the client can receive messages. This number should be different from field #09, Phone (Residence).
	This may be entered without an area code if it is the same as the default area code defined by the subgrantee.
13 GEO Code (Optional)	Record the appropriate locally designated geographic code.
14 Citizen	Select the appropriate number. The client must be a U.S. citizen or an eligible non-citizen to receive WIA-funded services.
	1 U.S. Citizen—A person entitled by birth or naturalization to the protection of a given state of the United States and authorized by the Attorney General to work in the United States.
	2 Eligible Non-Citizen—Eligible non-citizens are either: nationals, lawfully admitted permanent resident aliens, refugees, asylees, parolees, or other immigrants authorized by the Attorney General to work in the United States.
	3 Ineligible Non-Citizen—An individual who is neither a 1 (citizen) or 2 (eligible non-citizen) above. The individual is ineligible for the WIA program.
15 Alien Doc #	The documentation of an individual's employability (right-to-work) must be conducted in compliance with Title 8 CFR Section 274a.2 which states the requirements and procedures persons or entities must comply with when hiring, or when recruiting or referring for a fee, or when continuing to employ individuals in the United States. These requirements and procedures are published as the Form I-9, and take precedence over any State statute and regulation governing alien status determination.

16 Gender	Salast the appropriate number			
16 Gender	Select the appropriate number.			
	1 Female			
	2 Male			
17 Birthdate	Record the client's birthdate (MM/DD/YYYY).			
18 Age	Record the age of the client at the time of application.			
	Enter the client's age at time of application. The client's age should be calculated as the Application Date minus the birth date.			
	If the client's age is less than 14 years of age, the following message will appear:			
	"Age less than 14. Please check			
	birth date and re-enter."			
	If the age is entered incorrectly, the following message will appear:			
	"Age incorrect, calculated			
	age = (displays computed age)."			
19 Assessed (Optional)	Select the appropriate number. An initial assessment is a brief, preliminary information gathering process to determine the individual's skill levels, aptitudes, interests, (re) employability and other needs.			
	1 Yes, WIA Assessed—An initial assessment has been conducted by a WIA funded provider.			
	2 Yes, Non-WIA Assessed—An assessment has been conducted by a non-WIA funded agency.			
	3 Not Assessed—An initial assessment has not been conducted.			

### 20 Selective Service Registration

Select the appropriate number. An individual enrolled in a WIA program must meet the requirements of Section 3 of the Military Selective Service Act (Title 50 U.S.C. Appendix section 453). Each non-exempt male individual who has reached his 18th birthday, and until the age of 26 (including those who have been released from active military duty) must certify that he has registered with the Selective Service System before participating in, or receiving any benefit or assistance from WIA programs (www.edd.ca.gov/wiarep/wiad01-4.pdf).

- 1 Yes, Registered—The client has registered in accordance with the Military Selective Service Act (Title 50 U.S.C. Appendix section 453).
- 2 No, Not Registered—The client has not registered in accordance with the Military Selective Service Act. This individual is not eligible for WIA.
- 3 Exempt From Registration—This list includes:
  - a. Military Officer Procurement Program students at the Citadel, North Georgia College, Norwich University, and the Virginia Military Institute;
  - b. Men who are hospitalized, incarcerated, or institutionalized (must register within 30 days of release); and
  - c. Lawful non-immigrants on visas; and
  - d. Men who entered the United States after attaining their 26th birthday.

NOTE: Refer to the above link to determine exemption of individuals who did not register during the required registration period.

- **4. Not Required—**The Selective Service requirement does not apply to:
  - a. Females:
  - b. Males born prior to January 1, 1960, or
  - c. Males who have not yet reached their 18th birthday;
  - d. Cadets and midshipmen at the service academies; and
  - e. Men on active duty in the Armed Forces.

To obtain the choice list, press **<F1>** and a list of valid codes will be displayed.

#### 21 Race / Ethnicity

Select one or more.

#### AA Asian Indian

Persons who indicate their race as Asian Indian, as well as persons who did not classify themselves in one of the specific race categories, but reported entries such as Bengali, Bharati, Dravidian, East Indian, Goanese, Hindu India, Kashmiri, or South Asian.

#### AB Cambodian

Persons who indicate their race as Cambodian. Cambodia is a former name for the Khmer Republic.

#### AC Chinese

Persons who indicate their race as Chinese, as well as persons who did not classify themselves in one of the specific race categories, but reported entries such as Cantonese, Formosan, Taiwanese, or Tibetan.

#### AD Filipino

Persons who indicate their race as Filipino, as well as persons who did not classify themselves in one of the specific race categories, but reported entries such as Filipino American or Philippine.

#### AE Guamanian

Persons who indicate their race as Guamanian, as well as persons, who did not classify themselves in one of the specific race categories, but reported entries such as Chamorro or Guam.

#### AF Hawaiian

Persons who indicated their race as Hawaiian native, i.e., an individual whose ancestors were natives, prior to 1778, of the area which now comprises the state of Hawaii.

#### AG Japanese

Persons who indicated their race as Japanese, as well as persons who did not classify themselves in one of the specific race categories, but reported entries such as Nipponese or Japanese American.

## Race / Ethnicity (Continued)

#### AH Korean

Persons who indicated their race as Korean or Korean American.

#### Al Laotian

Persons who indicated their race as Laotian.

#### AJ Samoan

Persons who indicated their race as Samoan, American Samoan or Western Samoan.

#### AK Vietnamese

Persons who indicated their race as Vietnamese.

#### AL Other Asian/Pacific Islanders

Persons who indicated their race as Pacific Islander with categories other than the eleven categories listed above, e.g., Maoris, Fiji Islander, Tahitian or Thai.

#### AO Other Asian

A person who indicated their race as Asian other than the categories listed above, e.g., Hmong, Indo-Chinese, or Pakistani.

#### **BL** Black—Not Hispanic

A person having origins in any of the black racial groups of Africa.

## Race / Ethnicity (Continued)

#### HI Hispanic

A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin (including Spain), regardless of race. Among persons from Central and South American countries, only those who are of Spanish origin, descent, or culture should be included in this category. Persons from Brazil, Guiana, and Trinidad, for example, would be classified according to their race, and would not necessarily be included in this category. Also, the Portuguese should be excluded from this category and should be classified by their race.

Note: Federal statutes require ethnicity information to be collected separately from race information. If the Hispanic or Latino ethnicity is selected, a client's race should also be identified.

#### NA American Indian/Alaskan Native

A person having origins in any of the original peoples of North America and South America (including Central America), and who maintain cultural identification through tribal affiliation or community recognition.

#### WH White—Not Hispanic

A person having origins in any of the original people of Europe, North Africa, or the Middle East.

### 22 – 41 Concurrent Participation

For items 22 through 41, indicate if the applicant is participating in any of the following programs by circling the appropriate number. These items may be updated at anytime while the individual is receiving WIA services (except follow-up services).

1 Yes—The client receives services from this source, other than informational or self-service only. This activity is coordinated with the individual's WIA activities by inclusion in their WIA service plan or through the follow-up services.

#### 2 No

#### 22 Adult Education—WIA Title II

Adult education, basic skills and/or literacy activities. This service must be offered in combination with other allowable training services (not including customized training).

- 23 Job Corps—WIA Title I-Subtitle C
- 24 Farmworker Program—WIA Title I-Subtitle D, Sec. 167
- 25 Native American Program—WIA Title I-Subtitle D. Sec. 166
- 26 Veterans' Workforce Investment Programs—WIA Title I-Subtitle D, Sec. 168

Provided training services under WIA Sec. 168.

27 Veterans' Disabled Veterans' Outreach Program (DVOP) "Specialist" / Local Veterans' Employment Representative (LVER) –WIA Title I-Subtitle B, Sec 121

Services provided by DVOP/LVER (WIA Title I-Subtitle B, Sec. 121(b)(1)(B)(ix)).

#### 28 Trade Adjustment Act

Services funded by Trade Adjustment Act.

29 North American Free Trade Agreement (NAFTA-TAA)

Services funded by NAFTA-TAA.

#### 30 Vocational Education

Described in the Carl D. Perkins Voc. And Applied Tech. Ed. Act (20 U.S.C. 2471).

# Concurrent Participation (Continued)

- 31 Vocational Rehabilitation—WIA Title IV
- 32 Wagner-Peyser

Services funded by Wagner-Peyser Act.

- 33 Welfare-to-Work (WtW)—Participant No longer applies.
- 34 Title V Activities—Older Americans Act (OAA)

  Title V of the OAA of 1965 (42 U.S.C. 3056 et seq.).
- 35 Community Service Block Grant Program 42 U.S.C. 9001 et seq.
- 36 Housing and Urban Development (HUD) Program

Any employment and training services funded by the Dept. of Housing and Urban Development.

#### 37 Other non—WIA Program

Any non-WIA program not listed above that provided the individual with services authorized under WIA. Record only those programs that fund activities coordinated with the individual's WIA Title I activities possibly through a formal co-enrollment, by inclusion in the individual's WIA service plan, or through follow-up services.

#### 38 Rapid Response

Individual who participated in rapid response activities before WIA registration under WIA Sec. 134(a)(2)(A)(i).

#### 39 Rapid Response—Additional Assistance

An Individual who participated in a program funded by the State under WIA section 134(a)(2)(A)(ii).

### 40 Temporary Assistance for Needy Families (TANF) Services

Receiving cash assistance or other services under the TANF program.

#### 41 Food Stamp Training Program

Any employment and training services as described in section 6(d) of the Food Stamp Act of 1977.

			1		
42 Dis	sabled	Sel	ect the appropriate number.		
		Yes, Major—The client has a physical or mental impairment, which substantially limits one or more major life activities and has a record of such impairment, or is regarded as having such impairment.			
		Yes, Substantial—The client has a physical or mental impairment that constitutes or results in a substantial impediment to employment.			
		3	No		
43 Lin	nited English	Sele	ect the appropriate number.		
		1	<b>Yes</b> —An individual who has limited ability in speaking, reading, writing or understanding the English language and;		
			a. Whose native language is a language other than English; or		
			b. Who lives in a family or community environment where a language other than English is the dominant language.		
		2	No		
44 Su	bstance Abuse	Sele	ect the appropriate number.		
		1	<b>Yes</b> —The client requires substance abuse treatment in order to obtain employment.		
		2	No		
	-	Sele	ect the appropriate number.		
Sk	ills Deficient	1	<b>Yes</b> —The client meets the local definition of basic literacy skills deficient. Which must include a determination that an individual:		
			a. Computes or solves problems, reads, writes or speaks English at or below grade level 8.9; or		
			<ul> <li>Is unable to compute or solve problems, read, write, or speak English at a level necessary to function on the job, in the individual's family or in society.</li> </ul>		
		2 No			
		9	<b>Not Applicable</b> —Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.		

46 Offender	Select the appropriate number.			
	1 Yes—The client (adult or juvenile) who is or has been subject to any stage of the criminal justice process, for whom WIA services may be beneficial OR who requires assistance in overcoming artificial barriers to employment resulting from a record of arrest or conviction.			
	2 No			
	<b>9 Not Applicable</b> —Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.			
47 Pregnant /	Select the appropriate number.			
Parenting Youth	1 Yes—The client is under 22 years of age and is pregnant, or a youth (male or female) that provides custodial care for a minor child.			
	2 No			
	<b>9 Not Applicable</b> —Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.			
48 Youth Needing Assistance (Additional	Select the appropriate number. Local policy must set the criteria for what constitutes additional barriers to completing an educational program or securing employment.			
Barriers)	1 Yes—The client is between 14 and 21 years of age and requires additional assistance to complete an educational program, or to secure and hold employment.			
	2 No			
	<b>9 Not Applicable</b> —Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.			
49 Runaway Youth	Select the appropriate number.			
	1 Yes—The client is a youth (14-17) who absents his or herself from home or place of legal residence without the permission of parents or legal guardian.			
	2 No			
	<b>9 Not Applicable</b> —Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.			

50 Foster Child	Select the appropriate number.
	Yes—The client is a foster child on behalf of whom State or local government payments are made.
	2 No
	9 Not Applicable—Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.
51 Family TANF	Select the appropriate number.
	1 Yes—The client is listed on the grant and/or is receiving assistance under the Temporary Assistance to Needy Families (TANF) program at any time during WIA participation. Also include clients referred by the TANF agency, participated in the TANF assessment program as a requirement prior to opening a TANF grant, and who received support services from the TANF agency.
	2 No
52 Family GA	Select the appropriate number.
	1 Yes—The client is listed on the grant and/or is receiving cash assistance under a General Assistance program.
	2 No
53 Family RCA	Select the appropriate number.
	1 Yes—The client is listed on the grant and/or is receiving cash assistance under a Refugee Cash Assistance program.
	2 No
54 Family SSI	Select the appropriate number.
	1 Yes—The client is listed on the grant and/or is receiving cash assistance under the Supplemental Security Income program (SSI-SSA Title XVI).
	2 No

55 Family Food Stamps	Select the appropriate number.
	1 Yes, Eligible—The client has been determined to be eligible to receive food stamps pursuant to the Food Stamp Act of 1977 (7 USC 2011 et seq.) within the 6-month period prior to WIA application.
	Yes, Receiving—The client receives, or is a member of a family that receives food stamps pursuant to the Food Stamp Act of 1977 (7 USC 2011 et seq.)
	3 No
56 Number in Family	Record the total number of family members, including the client, in the individual's household.
	Include family members who are voluntarily and temporarily residing elsewhere, for example, attending college or visiting relatives. A stepchild or stepparent is considered to be related by marriage.
57 Number of Dependents < (less than) age 18	Record the number of the client's dependents that are under (less than) the age of 18.
58 Family Status	Select the appropriate number. An applicant's family status is necessary to determine the appropriate WIA economic eligibility. As defined in Section 101(15), the definition of family is two or more persons related by blood, marriage, or decree of court, who are living in a single residence, and are included in one or more of the following categories:
	A. Husband, wife, and dependent children.
	B. A parent or guardian and dependent children.
	C. A husband and wife.
	1 Parent in one-parent family—A single, abandoned, separated, divorced, or widowed parent who has primary responsibility for one or more dependent children under age 18.
	<b>2 Parent in two-parent family</b> —An individual who, with his/her spouse, shares custodial support for one or more dependent children, residing in the same residence.
	3 Other family member—An individual who is living with his or her family of two or more persons and is not a parent.

#### Family Status Not a family member—An individual who is not living (Continued) with his or her family, i.e. single individual without dependents. This also may be an individual who is: a. Homeless: b. Disabled, living with his or her family or not; c. A foster child, on behalf of who State and local government payments are made. d. Court Adjudicated youth separated from the family (including incarcerated youth), homeless, runaway, and emancipated youth. 5 Not reported 59 Family Income Enter the **whole dollar** amount that the client (or client's (Prior six months) family if a family member) received as income for the sixmonth period prior to WIA application. For information and guidance on determining an applicant's actual family income refer to (WIA Directive WIAD04-18, Eligibility Technical Assistance Guide). Exclude Unemployment Insurance compensation, child support payments, public assistance program payments, and old age and survivors insurance benefits received under Section 202 of the Social Security Act (42 USC 402). A client who is disabled, as noted as field #42, Disabled, should exclude the income of family members. 60 Low Income Select the appropriate number. An applicant's income status is necessary to determine the appropriate WIA eligibility. **Yes—**The client is in one or more of the following categories. **No—**The client does not fit into the following categories. The categories are: a. The client receives, or is a member of a family which receives cash payments under a Federal, State, or income-based public assistance program;

#### Low Income The client receives an income, or is a member of a (Continued) family that received a total family income. [exclusive of Unemployment Insurance compensation, child support payments, public assistance program payments, and old-age and survivors insurance benefits received Section 202 of the Social Security Act (42 USC 402)], for the six-month period prior to WIA application that, in relation to family size does not exceed the higher of: (1) The poverty guideline for the equivalent period; (2) 70 percent of the lower living standard income level, for an equivalent period; The client is a member of a household that receives (or has been determined within the sixmonth period prior to registration for the program involved, to be eligible to receive) Food Stamps under the Food Stamp Act of 1977; d. The client is a homeless individual, as defined in field #62. Homeless: e. The client is a foster child on behalf of whom State or local government payments are made; The client is an individual with a disability who meets the requirement of a program described in a or b above, but who is a member of a family that does not meet such requirements. 61 TANF Exhaustee Select the appropriate number. Yes—The client has exhausted all TANF benefits for which the individual has been determined eligible. 2 No

62 I	Homeless	Select the appropriate number.	
		1 Yes—The client lacks a fixed, regular and adequate nighttime residence; OR	
		Has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations; OR	
		Is residing in a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.	
		2 No	
		<b>9 Not Applicable</b> —Client chooses not to provide sufficient information to determine whether "Yes" or "No" above applies.	
63 F	Poor Work History	Select the appropriate number. The definition of this field is defined by local policy.	
		1 Yes	
		2 No	
64 U	Unemployment	Select the appropriate number.	
1	Insurance	1 Yes, UI Claimant—The client is currently receiving Unemployment Insurance compensation.	
		<b>2 Yes, UI Exhausted</b> —The client was receiving Unemployment Insurance compensation, but has exhausted claim benefits.	
		<b>No—</b> The client was neither an UI claimant nor an exhaustee.	
65 N	Veteran Status	Select the appropriate number.	
		1 Yes, <= (less than or equal) to 180 days—The client served in the active US military, naval, or air service for a period less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable.	
		Yes, > (greater than) 180 days—The client served as above for greater than 180 days.	
		3 No	

66 Disabled Veteran Select the appropriate number.	
	1 Yes—The client is a veteran entitled to disability compensation regardless of rate (include those rated at 0%) for a disability under laws administered by the Department of Veterans' Affairs (VA) or was discharged or released from active duty because of a service-connected disability.
	<b>2 Yes, Special disabled</b> —The client is rated at 30 percent disabled or more by the VA, or at 10 or 20 percent for a serious employment disability.
	3 No
67 Veteran Separation Date	Record the date the client was discharged or released from active US military, naval, or air service. (MM/DD/YYYY).
68 Recently	Select the appropriate number.
Separated Veteran	1 Yes—The client is a veteran who applied for WIA title I within 48 months after discharge or release from active US military, naval, or air service.
	2 No
69 Campaign Veteran	Select the appropriate number.
	1 Vietnam-Era—The client is a veteran who served in
	the active US military, naval, or air service, and who was discharged or released from such service under conditions other than dishonorable during the Vietnamera. (The period beginning on February 28, 1961, and ending on May 7, 1975, in the case of a veteran who served in the Republic of Vietnam during that period and the period beginning on August 5, 1964, and ending on May 7, 1975, in all other cases.)
	was discharged or released from such service under conditions other than dishonorable during the Vietnamera. (The period beginning on February 28, 1961, and ending on May 7, 1975, in the case of a veteran who served in the Republic of Vietnam during that period and the period beginning on August 5, 1964, and

# **AUTHORIZED CAMPAIGN OR EXPEDITION LIST**

Armed Forces Expeditionary Medals (AFEM)			
Berlin	Aug. 14, 1961 to Jun. 1, 1963		
Bosnia	Nov. 20, 1995 to Dec. 20, 1996; Dec.		
	20, 1996 to Jun. 20, 1998; Jun. 21,		
	1998, to present		
Cambodia	Mar. 29, 1973 to Aug. 15, 1973		
Cambodia Evacuation	Apr. 11 – 13, 1975		
Congo	Jul. 14, 1960 to Sept. 1, 1962 and Nov. 23 to 27, 1964		
Cuba	Oct. 24, 1962 to Jun. 1, 1963		
Dominican Republic	Apr. 28, 1965 to Sept. 21, 1966		
El Salvador	Jan. 1, 1981 to Feb. 1, 1992		
Grenada	Oct. 23, 1983 to Nov. 21, 1983		
Haiti	Sept. 16, 1994 to Mar. 31, 1995		
Iraq	Jan. 1, 1997 to present		
Korea	Oct. 1, 1966 to Jun. 30, 1974		
Kosovo	Mar. 24, 1999, to present		
Laos	Apr. 19, 1961 to Oct. 7, 1962		
Lebanon	Jul. 1, 1958 to Nov. 1, 1958, and		
Mayaguez Operation	Jun. 1, 1983 to Dec. 1, 1987 May 15, 1975 to May 15, 1975		
Operations in the Libyan Area	Apr. 12, 1986 to Apr. 17, 1986		
Panama	Dec. 20, 1989 to Jan. 31, 1990		
Persian Gulf Operation	Jul. 24, 1987 to Aug. 1, 1990		
Persian Gulf Operation	Dec. 1, 1995, to present		
Persian Gulf Operation	Dec. 1, 1995 to Feb. 1, 1997		
Persian Gulf Operation	Nov. 11, 1998 to Dec. 22, 1998		
Persian Gulf Operation	Dec. 16, 1998 to Dec. 22, 1998		
Persian Gulf Intercept Operation	Dec. 1, 1995 to Dec. 22, 1998  Dec. 1, 1995, to present		
Quemoy and Matsu Islands	Aug. 23, 1958 to Jun. 1, 1963		
Somalia	Dec. 5, 1992 to Mar. 31, 1995		
Taiwan Straits	Aug. 23, 1958 to Jan 1, 1959		
Thailand	May 16, 1962 to Aug. 10, 1962		
Vietnam Evacuation	Apr. 29, 1975 to Apr. 30, 1975		
Vietnam (including Thailand)	Jul. 1, 1958 to Jul. 3, 1965		
Navy Expeditionary Medal and Marine Corp			
Cuba	Jan. 3, 1961 to Oct. 23, 1962		
Indian Ocean/Iran	Nov. 21, 1979, to Oct. 20, 1981		

Navy Expeditionary Medal and Marine Corps Medals (Continued)			
Iranian/Yemen/Indian Ocean	Dec. 8, 1978 to Jun. 6, 1979		
Lebanon	Aug. 20, 1982 to May 31, 1983		
Liberia	Aug. 5, 1990 to Feb. 21, 1991		
Libyan Area	Jan. 20, 1986 to Jun. 27, 1986		
Panama	Apr. 1, 1980 to Dec. 19, 1986 and Feb. 1, 1990 to Jun. 13, 1990		
Persian Gulf	Feb. 1, 1987 to Jul. 23, 1987		
Rwanda	Apr. 7 – 18, 1994		
Thailand	May 16 – Aug. 10, 1962		
Other Campaign and Service Medals			
Army Occupation of Austria	May 9, 1945 to Jul. 27, 1955		
Army Occupation of Berlin	May 9, 1945 to Oct. 2, 1990		
Army Occupation of Germany (exclusive of Berlin)	May 9, 1945 to May 5, 1955		
Army Occupation of Japan	Sept. 3, 1945 to Apr. 27, 1952		
Chinese Service Medal (Extended)	Sept. 2, 1945 to Apr. 1, 1957		
Korean Service	Jun. 27, 1950 to Jul. 27, 1954		
Kosovo Campaign Medal (KMC)	Mar 24, 1999 to Jun. 10, 1999		
Kosovo Campaign Medal (KMC)	Jun. 11, 1999 to (date to be determined)		
Kosovo Campaign Medal (KMC)	Apr. 4, 1999 to Sept. 1, 1999		
Kosovo Campaign Medal (KMC)	Apr. 4, 1999 to Jul. 10, 1999		
Kosovo Campaign Medal (KMC)	Mar. 24, 1999 to Jul. 20, 1999		
Kosovo Campaign Medal (KMC)	Apr. 5, 1999 to Jun. 24, 1999		
Kosovo Campaign Medal (KMC)	Mar. 31, 1999 to Jul. 8, 1999		
Kosovo Campaign Medal (KMC)	Jun. 11, 1999 to (date to be determined)		
Kosovo Campaign Medal (KMC)	Apr. 1, 1999 to Nov. 1, 1999		
Navy Occupation of Austria	May 8, 1945 to Oct. 25, 1954		
Navy Occupation of Trieste	May 8, 1945 to Oct. 25, 1954		
Southwest Asia Service Medal (SWASM) (Operations Desert Shield and Desert Storm)	Aug. 2, 1990 to Nov. 30, 1995		
Units of the Sixth Fleet (Navy)	May 9, 1945 to Oct. 25, 1955		
Vietnam Service Medal (VSM)	Jul. 4, 1965 to Mar. 28, 1973		
Rwanda	Apr. 7 – 18, 1994		
Thailand	May 16 – Aug. 10, 1962		

For the most current information, please check the OPM web site at <a href="https://www.opm.gov/veterans/html/vgmedal2.htm">www.opm.gov/veterans/html/vgmedal2.htm</a>

### 70 Spouse of Select the appropriate number. Qualifying Veteran Yes—The client is: a. A surviving spouse of a veteran who died as a result of a service-connected disability; including the surviving spouse of a veteran who died in the active military, naval or air services and the surviving spouse of a veteran who was totally disabled at the time of death. b. A spouse of an active duty service member who has for a period of at least 90 days been missing in action, captured by a hostile force or forcibly detained or interned in line of duty by a foreign government. c. A spouse of a veteran who is totally disabled due to a service connected disability. **No—**The client is not the spouse of a veteran who falls into one of the above categories. 71 Highest Grade Record the highest number that applies to the client. Completed No school grades completed. 1-11 Number of elementary/secondary grades completed. Individuals who completed 12th grade but did not receive a diploma or equivalent are to be coded 11. Disabled clients who received a Certificate of Completion or an Individual Education Plan diploma are to be coded as 11. 12 High School graduate. 88 Attained certificate of equivalency for a high school degree (e.g., GED).

technical or vocational school.

Bachelor's degree or equivalent.

Education beyond the Bachelor's degree.

If a high school graduate, the number of school years completed including college or full-time

13-15

16

17

<b>70 5 1</b> 11 01 1		
72 Education Status at	Select the appropriate number.	
Application	1 Student, H.S. or less—The client is not a high school graduate (or equivalent) and is attending any school (including elementary, intermediate, junior high school, secondary or post secondary, or alternative school) or is between school terms and intends to return to school.	
	2 Student, attending post H.S.—The client is a high school graduate (or equivalent) and is attending a post secondary school or is between school terms and intends to return to school.	
	<b>3 Out-of-School, H.S. dropout</b> —The client is not attending any school and is not a high school graduate.	
	4 Out-of-School, H.S. grad, employment difficulty— The client is not attending any school, is a high school graduate, and is basic skills deficient, unemployed, or underemployed.	
	5 Out-of-School, H.S. grad, no employment difficulty—The client is not attending any school, is a high school graduate and is not basic skills deficient and not unemployed and not underemployed.	
73 Reading Grade	Record the client's grade level equivalent in English reading as determined by a generally accepted standardized or criterion-referenced test (administered within the last 12 months) or a school record of reading level (administered within the last 12 months).	
	Grade Level Codes:	
	0-12.9 Grade level equivalent test result	
	<b>13.0</b> Grade 13 to 15	
	87.0 Not tested and obviously below the 9th grade level	
	<b>88.0</b> Refused testing, could not be tested or testing was not needed	
	89.0 Individuals whose highest grade is equal to 16 or above	
	Either field #73, or fields #74-76 are required.	
74 Reading Score	Record the client's raw score in reading English as determined by a generally accepted standardized or criterion-referenced test.	

75 Reading Test	If a raw score is reported in field #74, Reading Score, record the code for the test that was administered from the list below:	
	01 Adult B	asic Learning Examination (ABLE)
	<b>002</b> DOL W	orkplace Literacy Test (DOL-WLT)
	003 Adult Li	teracy Test (ALT)
	<b>004</b> Armed	Forces Qualifying Test (AFQT)
	<b>05</b> Basic C	Occupational Literacy Test (BOLT)
	006 Californ	ia Achievement Test (CAT)
	07 Career	Ability Placement Survey (CAPS)
	•	ehensive Adult Student Assessment System  6) Appraisal
	09 CASAS	Survey Achievement Tests
	10 Genera	I Aptitude Test Battery (GATB)
	<b>11</b> lowa Te	est of Basic Skills (ITBS)
	12 Metropo	olitan Achievement Test (MAT)
	013 Reading Job Corps Screening Test (RJCST)	
	014 Tests of Adult Basic Education (TABE)	
	<b>15</b> Wide R	ange Achievement Test (WRAT)
	16 Other	
76 Read Version (Optional)		re is reported in field #74, Reading Score, rsion of the Reading Test, field #75, that was to the client.

77 Math Grade	Record the client's grade level equivalent in computational skills as determined by a generally accepted standardized or criterion-referenced test (administered within the last twelve months) or a school record of reading level (administered within the last twelve months).	
	Grade Level Codes:	
	0-12.9 Grade level equivalent test result	
	<b>13</b> Grade 13 to 15	
	87 Not tested and obviously below the 9th grade level	
	88 Refused testing, could not be tested or testing was not need	
	89 Individuals whose highest grade is equal to 16 or above	
	Either field #77, or fields #78-80 are required.	
78 Math Score	Record the client's raw score in computation skills as determined by a generally accepted standardized or criterion-referenced test.	
79 Math Test	If a raw score is reported in field #78, Math Score, record the code for the test that was administered from the list below:	
	<b>001</b> Adult Basic Learning Examination (ABLE)	
	<b>004</b> Armed Forces Qualifying Test (AFQT)	
	006 California Achievement Test (CAT)	
	007 Career Ability Placement Survey (CAPS)	
	008 Comprehensive Adult Student Assessment System (CASAS) Appraisal	
	009 CASAS Survey Achievement Tests	
	010 General Aptitude Test Battery (GATB)	
	011 Iowa Test of Basic Skills (ITBS)	
	012 Metropolitan Achievement Test (MAT)	
	014 Tests of Adult Basic Education (TABE)	
	015 Wide Range Achievement Test (WRAT)	
	016 Other	
80 Math Version (Optional)	If a raw score is reported in field #78, Math Score, record the version of the Math Test, field #79, that was administered to the client.	

	<u> </u>	
81 Pell Grant Recipient	Select the appropriate number. This item may be update at anytime while the individual is receiving WIA services (except follow-up services).	
	1 Yes—The client is, or has been notified they will be, receiving a Federal Pell Grant.	
	2 No, Applied but denied—The client applied for a Pell Grant, but was denied.	
	<b>No, Application Pending</b> —The client applied for a Pell Grant, and is waiting for approval or denial.	
	4 Application not submitted—The client did not apply for a Pell Grant.	
82 Pell Grant School Year Award Amount	Record the dollar amount ("0000.00") of the Pell Grant that has been awarded to the client for the year.	
83 Labor Force Status	Select the appropriate number.	
(Optional)	1 Employed—During the last seven-days prior to WIA application, the individual:	
	<ul> <li>a. Has done any work at all as a paid employee, in his or her own business, profession or farm; OR</li> </ul>	
	<ul> <li>b. Has done 15 or more hours as an unpaid worker in an enterprise operated by a member of the family; OR</li> </ul>	
	c. Has a job or business from which he or she is temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time-off, and whether or not they are seeking another job.	
	2 Not employed—The client does not meet the definition of employed or who, although employed, has received notice of termination of employment. This also includes dislocated workers engaged in "stopgap" employment. A complete definition of "stopgap" employment can be found in the WIA Eligibility Technical Assistance Guide (TAG) for PY2003-2004.	
84 Weeks Not Employed Last 26 Weeks	Record the number of weeks (1-26) that the client was not employed during the 26 weeks immediately prior to applying for WIA. This field will be skipped if Labor Force Status in field #83 is 1 (Employed).	

85	Hourly Wage (Optional)	Record the hourly wage the client earned or is earning. If the individual is paid by commission or receives a salary, you can convert to the hourly wage by dividing the amount paid by the number of hours the individual is working. The term "hourly wage" can include any bonuses, tips, gratuities, commissions, and overtime pay earned. The hourly wage collection should be consistent with the manner that the hourly wage is collected on the follow-up form in order for these figures to be used in estimating the earnings gains for the client.
86	Referred by WPRS (Profiling)	<ul> <li>Select the appropriate number.</li> <li>Yes—The client is an Unemployment Insurance compensation claimant who has been referred to WIA reemployment services by the Worker Profiling and Reemployment Services (WPRS) system.</li> <li>No</li> </ul>
87	Dislocated Worker	Select the appropriate number.
		1. Terminated, or Laid off
		Has been terminated, voluntarily terminated, laid off or has received a notice of termination or layoff from employment; AND
		a. Is eligible for, or has exhausted, entitlement to Unemployment Insurance compensation; OR
		<ul> <li>b. Is not eligible for Unemployment Insurance compensation due to insufficient earnings or having performed services for an employer that was not covered under a State Unemployment Insurance compensation law, but demonstrates a sufficient attachment to the workforce; AND</li> </ul>
		Is unlikely to return to a previous industry or occupation.
		OR
		2. Received Notice of Layoff
		Has been terminated or laid off, or has received a notice of termination or layoff from employment as a result of any permanent closure of, or any substantial layoff at a plant, facility or enterprise;

# Dislocated Worker (Continued)

#### OR

# 3. Long Term Unemployed

The client is employed at a facility, has not received a notice but the employer has made a general announcement that the facility will close within 180 days; OR

For purpose of eligibility to receive services other than training services (WIA Section 134(d)(4)), intensive services (WIA Section 134(d)(3)) or supportive services, is employed at a facility at which the employer has made a general announcement that the facility will close but without a timeframe.

#### OR

# 4. Self Employed

Was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters.

#### OR

### 5. Displaced Homemaker

Is a displaced homemaker. A displaced homemaker means an individual who has been providing unpaid services to family members in the home and who:

- Has been dependent on the income of another family member but is no longer supported by that income; AND
- b. Is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.

# 9 Not Applicable

#### 88 Dislocation Date

Record the last day of employment at the dislocation job (MM/DD/YYYY). If there is no dislocation job, (e.g., displaced homemakers), leave blank. If the individual is still employed, this field should be left blank until the qualifying dislocation takes place.

89	Job Code at Dislocation	Record the five or six-digit SOC/O*NET, ONET3, OES, or nine-digit DOT code that best describes the individual's type of employment at their place of dislocation. This code should be the one at which the individual is most skilled or the one for the job held longest. NOTE: The choice of Job Code Type (SOC, ONET3, OES,) is limited based on system design. The Job Code Type JTA will accept is selected in the Enter System Function Table (ESYS) screen by the JTA System Administrator. If you do not know which Job Code Type your system is configured for, contact your JTA MIS Administrator.
90	Job Title	After a valid job code has been entered, the job title will be displayed in this field. Record the title of the job noted in field #89.
91	Dislocation Industry Code (Optional)	Record the first three-digits of the Standard Industrial Classification (SIC) or North American Industry Classification System (NAICS) industry code of the qualifying dislocation.
92	Tenure at Employer of Dislocation (months)	Record the number of months ("000") the client was employed at the place of dislocation.
93	Employer Number	Record the number assigned to the employer from the list provided by the subgrantee MIS section.
94	Employer Name	Record the business name of the employer for whom the client is/was working.  After entry of a valid employer number, all employer information will be displayed.
	Employer Address	These fields will auto-fill after the Employer Number has been entered.
	Employer City	Record the city of the employer.
	Employer State / Zip	Record the State and Zip code of the employer.
	Employer Telephone	Record the employer's contact telephone number including the area code. Do not leave this item blank.

### 95 Eligibility

Select the appropriate letter.

#### A Adult WIA

The client is eligible for the Adult WIA program if the individual is age 18 or older.

#### **B** Adult Low Income

The client is eligible for the Adult Low Income program if the individual is age 18 or older AND is considered low income, as noted in field Line Item #60, Low Income.

WIA Section 134 (d)(4)(E) PRIORITY: Unless the local board determines that funds allocated to a local area for adult employment and training activities are not limited under paragraph (2)(A) or (3) of Section 133(b), priority shall be given to recipients of public assistance and other low income individuals for intensive services and training services. The local board shall direct the one-stop operators in the local area with regard to making determinations related to such priority.

#### D Dislocated Worker

- **1.** Has been terminated, voluntarily terminated, laid off or has received a notice of termination or layoff from employment; AND
  - a. Is eligible for, or has exhausted, entitlement to Unemployment Insurance compensation;

#### OR

 Is not eligible for Unemployment Insurance compensation due to insufficient earnings or having performed services for an employer that was not covered under a State Unemployment Insurance compensation law, but demonstrates a sufficient attachment to the workforce; AND

Is unlikely to return to a previous industry or occupation.

# Eligibility (Continued)

#### OR

2. Has been terminated or laid off, or has received a notice of termination or layoff from employment as a result of any permanent closure of, or any substantial layoff at a plant, facility or enterprise;

#### OR

The client is employed at a facility, has not received a notice but the employer has made a general announcement that the facility will close within 180 days;

For services other than training services (Section 134(d)(4)), intensive services (Section 134(d)(3)) or supportive services, is employed at a facility at which the employer has made a general announcement that the facility will close but without a timeframe.

#### OR

**3.** Was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters.

#### OR

- **4.** Is a displaced homemaker. A displaced homemaker means an individual who has been providing unpaid services to family members in the home and who:
  - Has been dependent on the income of another family member but is no longer supported by that income; AND
  - b. Is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.

# Eligibility (Continued)

### F Youth (age 14 – 18)

The client is eligible for Youth services (WIA Section 101(13)), if the following criteria have been met:

- 1. The client is age 14 through 18;
- 2. Is a low income individual, as defined in WIA Section 101(25), and noted in field #60, Low Income;

#### **AND**

- 3. Is within one or more of the following categories:
  - a. Deficient in basic literacy skills; OR
  - b. School dropout: OR
  - c. Homeless, runaway, or foster child; OR
  - d. Pregnant or parenting; OR
  - e. An offender; OR
  - f. Is an individual (including a youth with a disability) who requires additional assistance to complete an educational program, or to secure and hold employment (WIA Section 101(13)).

### G Youth (age 19 – 21)

The client is eligible for Youth services (WIA Section 101(13)), if the following criteria have been met:

- 1. The client is age 19 through 21;
- 2. Is a low income individual, as defined in WIA Section 101(25), and noted in field #60, Low Income;

#### **AND**

- 3. Is within one or more of the following categories:
  - a. Deficient in basic literacy skills; OR
  - b. School dropout; **OR**
  - c. Homeless, runaway, or foster child; **OR**
  - d. Pregnant or parenting; **OR**
  - e. An offender; OR

# Eligibility (Continued)

f. Is an individual (including a youth with a disability) who requires additional assistance to complete an educational program, or to secure and hold employment (WIA Section 101(13)).

#### **H** Veteran Grant

The client is eligible for Veteran services (WIA Section 168), if the following criteria have been met:

1. The client is eligible as an individual who served in the active military, naval, or air service, and who was discharged or released from such service under conditions other than dishonorable.

#### **AND**

- 2. Is within one or more of the following categories:
  - a. Service-connected disability: **OR**
  - b. Significant barrier to employment; **OR**
  - c. Campaign veteran; OR
  - d. Recently separated veteran.

## I 5 Percent Window Youth (age 14 – 18)

Not more than 5 percent of clients assisted under WIA Section 129(c)(5) in each subgrantee may be individuals who **do not meet** the minimum income criteria, as noted in field #60, Low Income, to be considered eligible youth. Such individuals must be age 14 through 18 at the time of WIA application;

#### **AND**

Is within one or more of the following categories:

- 1. School dropout; OR
- 2. Deficient in basic literacy skills; OR
- Educational attainment is one or more grade levels below the grade level appropriate to the age of the individual; OR
- 4. Pregnant or parenting; **OR**
- 5. Is disabled, including learning disabilities; **OR**
- 6. Homeless or runaway; **OR**
- 7. Offender; **OR**
- 8. Faces serious barriers to employment as identified by the local board.

Eligibilit.	,	E Doroont Window Vouth (cas 40 24)
Eligibility (Continued)	J	5 Percent Window Youth (age 19 – 21)  Not more than 5 percent of clients assisted under WIA Section 129(c)(5) in each subgrantee may be individuals who <i>do not meet</i> the minimum income
		criteria, as noted in field #60, Low Income, to be considered eligible youth. Such individuals must be age 19 through 21 at the time of WIA application;
		AND
		Is within one or more of the following categories:
		School dropout; <b>OR</b>
		Deficient in basic literacy skills; OR
		<ol><li>Educational attainment is one or more grade levels below the grade level appropriate to the age of the individual; OR</li></ol>
		3. Pregnant or parenting; <b>OR</b>
		4. Is disabled, including learning disabilities; <b>OR</b>
		5. Homeless or runaway; <b>OR</b>
		6. Offender; <b>OR</b>
		7. Faces serious barriers to employment as identified by the local board.
	N	Long Term Unemployed
		The client is eligible for the National Emergency Grant (NEG), Wildfire Project. The client is eligible as Long Term Unemployed if the following criteria have been met:
		<ol> <li>Client has been unemployed for 15 weeks out of the last 26-weeks; AND</li> </ol>
		2. Are unlikely to return to their normal or usual occupation from which they became unemployed.
	Х	Not Eligible
		The client is ineligible for the WIA program.
Signature of Interviewer		e person responsible for completion of this form must n here.
96 Interviewer ID (Optional)	sub	cord the identification number assigned by the ograntee for the person responsible for completion of sform.
Date	Re	cord the date the interviewer completed this form.

	Signature of Reviewer	The reviewer must sign the application form. The signature certifies that the proper eligibility has been determined for the WIA program.
97	Reviewer ID (Optional)	Record the identification number assigned by the subgrantee for the person responsible for review of this form.
	EWIR Complete	All fields that are required for "EWIR Complete" must have valid values before this field can be changed to "YES." Otherwise this field will display as "NO."
	Date	Record the date the reviewer signed this form.
	Signature of Client	Once the application form has been completed, review the form with the client and have them sign the application form. The client's signature constitutes the client's certification that the WIA application information is true and correct.
	Date	Record the date the client signed the application form.
	Signature of Parent, Guardian or Responsible Adult	In the case of a client who is a minor (except an emancipated minor), the signature of a parent, guardian or responsible adult is required to certify that the WIA application information is true and correct.
	Date	Record the date the parent, guardian or responsible adult signed the application form.
	Remarks	Provide any additional details essential to this application form.



Upon completion of all the appropriate fields, the record may be filed by pressing the **<F5>** key. At that time the client and application tables in the database will be updated.

# **Function Keys**

The following are the function keys that are available in this program:

<f4></f4>	This function is operational in this form.					
<f5></f5>	At time of filing, if an application number is auto-generated, the following prompt will be displayed:					
	"Please record auto-generated data.					
	Press any key to continue."					
<f6></f6>	If there is no case number linked to this application, then it may be deleted. If case records are linked to this application, the following message will be displayed:  "Form may not be deleted, case data exists."					
<f7></f7>	Page back to previous page.					
<f8></f8>	Page forward to next page.					
<shift f7=""> or <f17></f17></shift>	This function key will call the Display Client History module.					

All other function keys will operate in the normal mode.

Chapter

3

# **Enter WIA Enrollment/Registration Form (EWIE)**

The Enter Workforce Investment Act (WIA) Enrollment/Registration form (EWIE) is used to record the enrollment of an eligible WIA client into the WIA program. An enrollment form is completed to enroll a client into an activity.

Individuals who are primarily seeking information and do not seek direct, one-on-one staff assistance do not need to be enrolled/registered. However, when an individual seeks more than minimal assistance from staff in taking the next steps toward self-sufficient employment, then eligibility must be determined. At that time, an Enrollment/Registration form is completed to enroll the client into an activity. Enrollment/Registration is the point at which information that is used in performance measurements begins to be collected.

Only one enrollment form is completed for each client unless the client is receiving services from different WIA funding sources. For example, if a client were co-enrolled in both the WIA Adult program and the Older Youth program, a separate enrollment form would be completed for each funding source. A separate line on the enrollment form will be used for each specific activity, such as adult education, case management and training.



# **WORKFORCE INVESTMENT ACT ENROLLMENT/REGISTRATION**

Subgrantee Name			
01	Social Security Number		
02	Case Number		
App	olication Number		

Last	Name								First Name /	Midd	le Initial				
03	Grant Code	04 Age	ency Code	05 I	Labor F	Force State	us	06	Enrollment Date	<u> </u>	07 Dat	e ITA Established	d 08 Total A	mount of ITA	
1		1 [	Employed												
Activity 1	09 Activity Code	10 Agency Code	11 State Provider	D I	12 Program Code Job (		Job Co	13 Code / Job Description			14 gin Date	15 Est / End Date	16 ITA Amount Used	17 Completion Code	18 Goal Code
Activity 2	Activity Code	Agency Code	State Provider	D I	Program Code J		Job Co	Job Code / Job Description			gin Date	Est/End Date	ITA Amount Used	Completion Code	Goal Code
Activity 3	Activity Code	Agency Code	State Provider	D I	Program Code		Job Code / Job Description			Be	gin Date	Est/End Date	ITA Amount Used	Completion Code	Goal Code
Enro	lling Staff Si	gnature	1		19 Enrolling Staff ID					Date					
Core 10 Follow-up Services, Counseling 11 Staff Assisted Job Development 12 Staff Assisted Job Referrals 13 Staff Assisted Job Search, Placement 14 Staff Assisted Workshops / Job Clubs 15 Other Core Services 16 Non-WIA Funded Core Services 17 Co-enrolled Core Services 18 Comprehensive Assessments 19 Development of Individual Employment Plan 19 Group Counseling 19 Work / Entry Employment Experience 19 Individual Counseling and Career Planning 10 Out-of-Area Job Search 11 Relocation Expenses 12 Short Term Pre-vocational Services 13 Internships 14 Other Intensive Services 15 Individual Counseling Services 16 Non-WIA Funded Intensive Services 17 Co-enrolled Intensive Services					Training 50 Adult Education 51 Customized Training 52 Entrepreneurial Training 53 Job Readiness Training 54 Occupational Skills Training 55 On-The-Job Training 56 Private Sector Training 57 Skill Upgrading and Retraining 58 Workplace Training and Coop Ed 59 Other Training Services 60 Non-WIA Funded Training Services 61 Co-enrolled Training Services 70 Summer-related 71 Educational Achievement Services 72 Employment Services 73 Citizen and Leadership Services 74 Other Youth Services 75 Non-WIA Funded Youth Services 76 Co-enrolled Youth Services 77 Wiscellaneous 80 Other JTPA 81 Supportive Services 82 Needs-related Payments 83 Planned Break In Services: Delay in Training 84 Non-WIA Funded Miscellaneous 85 Co-enrolled Miscellaneous Services 86 Planned Break in Services: Health / Medical						Goal Codes (Youth Only)  Basic Skills  001 Reading Comprehension 002 Math Computation 003 Writing 004 Speaking 005 Listening 006 Problem Solving, Reasoning, Decision Making 013 ESL / VESL 015 Life Skills  Occupational Skills 007 Perform Actual Tasks 008 Familiarity with Procedures, Tools 016 Technology 019 Information Skills  Work Readiness Skills 009 World of Work Awareness 010 Labor Market Knowledge 011 Career Planning 012 Job Search Techniques 014 Leadership 017 Allocates Resources 018 Team Work 020 Interpersonal Skills  Completion Codes  1 Completed 2 Not Completed, Involuntary 3 Not Completed, Voluntary				

# **Sample Entry Screen**

The mnemonic for accessing the entry data screen is located in the MWIS Workforce Investment Act Screens menu option within the MWIA Workforce Investment Act menu option. The fastest method to activate the program is by entering the program's mnemonic "EWIE" anywhere within the menu environment. After entering the mnemonic, the following data entry screen is displayed:

# **Enter WIA Enrollment/Registration Form**

EWIE Enter V	VIA Enrollment/Registration Form	ADD
01 SSN 02 Case Num 03 Grant Code 04 Agency Code 05 Labor Force Status Activities / Services Section	Name App Num  06 Enrollment Date / / 07 Date ITA Established/ / 08 Total Amt of ITA 19 Enrolling Staff ID	
Ac Agy Provider Program Cd Cd Code Code	Job Code Begin Date Est / End ITA Amt Cmp	GI Cd

### **Line Item Instructions**

The following are line item instructions for the WIA Enrollment/Registration form. These instructions are intended to assist you with completion of this form and data entry into the Job Training Automation (JTA) system.



For detailed instructions on the JTA system, please refer to the instructions marked with this icon.

0.1	
Subgrantee Name (Optional)	Record the name of the subgrantee or the four character alpha code.
01 Social Security Number	Record the client's Social Security Number (SSN). Compare the SSN entered here to the SSN shown on the application form to verify its accuracy.
	The Department of Labor (DOL) does not accept records transmitted without valid Social Security Numbers.
02 Case Number	If the form you are using does not have a pre-printed number, you may either assign one or allow the computer to assign the next sequential number. Do not reuse closed case numbers.
	To auto-generate a number, press <b><enter></enter></b> on this field. You will be asked if you wish to auto-generate a number. If you respond with " <b>Y</b> ", a number will be generated when the record is filed.
	If this is a new case record, the word "ADD" will appear in the upper right-hand corner of the screen. If this is an existing case record, either the word "UPDATE" or "VIEW" will appear.
	When a record is opened in "UPDATE" mode, the record will be locked and only the person updating that record will have access to that record. If another user attempts to access the record, a message will appear indicating no changes can be made because the record is "locked."
Application Number	Record the application number as it appears on the WIA application form.
	The application must exist in the database and be complete. After the application number has been entered, the client's name will be displayed.
	At this point, you may view the history for the client by pressing the <b><shift f7=""> or <f17></f17></shift></b> key. This is the Display Client History key and will display the same information as the Query Client History (QCH).
Last Name	Record the client's last name and compare it with the application form to verify its accuracy.
First Name / Middle Initial	Record the client's first name/middle initial and compare it with the application form to verify its accuracy.

03 Grant Code	Record the grant code of the WIA program in which the client is being served. Refer to the list of assigned WIA grant codes for accurate identification numbers.  Client must be eligible on the application form for the grant entered here. (See field #95 on the Application form.) The <f1> key may be pressed to display a list of valid grant</f1>
	codes.
04 Agency Code (Optional)	Record the code that has been assigned by the subgrantee to the service provider that conducts the initial intake interview. This is an optional entry.
	If the agency code is not known, use the <b><f1></f1></b> key to display a window of valid agency codes.
05 Labor Force St	Record the current employment status of the client on the date enrolled/registered into a WIA program. Select the appropriate number.
	<b>1 Employed</b> —During the last seven-days prior to WIA registration, an employed individual:
	<ul> <li>a. Has done any work at all as a paid employee, in his or her own business, profession or farm; OR</li> </ul>
	<ul> <li>b. Has done 15 or more hours as an unpaid worker in an enterprise operated by a member of the family;</li> <li>OR</li> </ul>
	c. Has a job or business from which he or she is temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time-off, and whether or not they are seeking another job.
	2 Not employed—The client does not meet the definition of employed or who, although employed, has received notice of termination of employment. This also includes dislocated workers engaged in "stopgap" employment. A complete definition of "stopgap" employment can be found in the WIA Eligibility Technical Assistance Guide (TAG) for PY2003-2004.
06 Enrollment Da	Record the actual date (MM/DD/YYYY) that the client enrolled in the WIA program. Do not leave this item blank. This date cannot be prior to the application date.

# 07 Date ITA Established (Optional)

Record the date (MM/DD/YYYY) that the Individual Training Account (ITA) was established on behalf of a client. WIA Title I adult and dislocated workers purchase training services from eligible providers they select in consultation with the case manager.

Contracts for services may be used instead of ITA's only when one of the following three exceptions apply:

1. When the services provided are on-the-job training (OJT) or customized training;

#### OR

 When the Local Board determines that there are an insufficient number of eligible providers in the local area to accomplish the purpose of a system of ITA's. The Local Plan must describe the process to be used in selecting the providers under a contract for services;

#### OR

3. When the Local Board determines that there is a training services program of demonstrated effectiveness offered in the area by a community-based organization (CBO) or another private organization to serve special client populations that face multiple barriers to employment, as described in WIA Section 134(d)(4)(G).



This field does not apply to WIA youth. This is an optional field and should be left blank if it does not apply. This field may be updated at a later date, prior to completion of all services (exit).

# 08 Total Amount of ITA

Record the total dollar amount ("00000.00") of the ITA established for the client. This does not apply to WIA youth. This is an optional field and should be left blank if it does not apply. Payments from ITA's may be made in a variety of ways, including the electronic transfer of funds through financial institutions, vouchers, or other appropriate methods. Payments may also be made incrementally, through payment of a portion of the costs at different points in the training course.

### 09 Activity Code

An adult or dislocated worker WIA client must have at least one registered core activity before an intensive activity, and they must have at least one intensive activity before a training activity, even if Non-WIA funds, (core code #16 and intensive code #41 below) are used to support these activities. Record the code for the activity provided to the client from the list below:



If the Activity Code is not known, you may use the **<F1>** key to display a list of codes.

#### **CORE**

#### 10 Follow-up Services, Counseling

- a. Follow-up services must be completed for a minimum of 12 months after employment begins for registered Adults and Dislocated Workers who are placed into unsubsidized employment and served under WIA. Local areas have broad discretion in determining the intensity and type of follow-up services. Follow-up services could include, but are not limited to:
  - (1) Additional career planning and counseling;
  - (2) Contact with the client's employer, including assistance with work-related problems that may arise;
  - (3) Peer support groups;
  - (4) Information about additional educational opportunities, and referral to supportive services available in the community.

In determining the need for these post-placement services, there may also be a review of the client's need for supportive services to meet the client's employment goals. As provided in Sec. 663.815, financial assistance, such as needs-related payments, for employed clients is not an allowable follow-up service since, under WIA section 134(e)(3)(A), needs-related payments are restricted to unemployed persons who have exhausted or do not qualify for Unemployment Insurance compensation and who need the payments to participate in training.

b. Comprehensive guidance and counseling, which may include drug and alcohol abuse counseling and referral, as appropriate.

### 11 Staff Assisted Job Development

Staff assists the individual by working with the employer and job seeker.

#### 12 Staff Assisted Job Referrals

Staff refers the individual to an employment opportunity and assists with testing and background checks.

#### 13 Staff Assisted Job Search, Placement

Staff provides career counseling to assist the individual in determining whether more intensive services are required to obtain employment.

# 14 Staff Assisted Workshops/Job Clubs

Job search assistance (including job search skills training and job club activities) means the provision of instruction and support to a client to give the client skills in acquiring full time employment. The services provided may include, but are not limited to, resume writing, interviewing skills, labor market guidance, telephone techniques, information on job openings, and job acquisition strategies, as well as the provision of office space and supplies for the job search.

#### 15 Other Staff Assisted Core Services

Other core services that do not fit into the above categories.

#### 16 Non-WIA Funded Staff Assisted Core Services

Core services were provided to the individual by Non-WIA funding sources.

#### 17 Co-enrolled Core Services

Core services were provided to the individual by coenrolling into a different WIA funding source.

#### INTENSIVE

# 30 Case Management for Participants

Case management refers to the provision of a clientcentered approach in the delivery of services.

### 31 Comprehensive Assessments

Includes diagnostic testing and use of other assessment tools, and in-depth interviewing and evaluation to identify employment barriers and appropriate employment goals.

# 32 Development of Individual Employment Plan

Development of a plan, which identifies the employment goals, appropriate achievement objectives, and appropriate combination of services for the client to achieve the employment goals.

# 33 Group Counseling

Group counseling and career planning was provided to the client to achieve their employment goals.

#### 34 Work/Entry Employment Experience

A planned, structured learning experience that takes place in a workplace for a limited period of time. Work experience may be paid or unpaid, as appropriate. A work experience workplace may be in the private for profit sector, the non-profit sector, or the public sector.

# 35 Individual Counseling and Career Planning

Individual counseling and career planning was provided to the client to achieve employment goals.

#### 36 Out-of-Area Job Search

Client was provided services for out-of-area job search.

#### 37 Relocation Expenses

Provided financial assistance to relocate in order to accept employment, as provided for by local policy.

#### 38 Short Term Pre-vocational Services

Includes the development of learning skills, communication skills, interviewing skills, punctuality, personal maintenance skills, and professional conduct, to prepare individuals for unsubsidized employment or training.

### 39 Internships

Staff refers the individual to an intern opportunity.

#### 40 Other Intensive Services

Other intensive services that do not fit into the above categories.

#### 41 Non-WIA funded Intensive Services

Intensive services were provided to the individual by Non-WIA funding source.

#### 42 Co-enrolled Intensive Services

Intensive services were provided to the individual by co-enrolling into a different WIA funding source.

#### **TRAINING**

#### 50 Adult Education

This service must be offered in combination with other allowable training services (not including customized training).

#### 51 Customized Training

Training that is:

- a. Designed to meet the special requirements of an employer (including a group of employers); AND
- b. That is conducted with a commitment by the employer to employ an individual on successful completion of the training; AND
- c. For which the employer pays for not less than 50 percent of the cost of the training.

#### 52 Entrepreneurial Training

Entrepreneurial training is provided to the client.

#### 53 Job Readiness Training

Training in job seeking and interviewing skills, understanding employer expectations, and enhancing a client's capacity to move toward self-sufficiency.

## 54 Occupational Skills Training

Occupational skills training, including training for non-traditional employment.

# 55 On-the-Job Training

Training by an employer that is provided to a paid client while engaged in productive work in a job that:

- a. Provides knowledge or skills essential to the full and adequate performance of the job; AND
- b. Provides reimbursement to the employer of up to 50 percent of the wage rate of the client, for the extraordinary costs of providing the training and additional supervision related to the training; AND
- c. Is limited in duration that is appropriate to the occupation for which the client is being trained, taking into account the content of the training, the prior work experience of the client, and the service strategy of the client, as appropriate.

#### 56 Private Sector Training

Training programs operated by the private sector.

# 57 Skill Upgrading and Retraining

Training was provided for the purpose of upgrading the skills and/or retraining the client.

#### 58 Workplace Training And Coop Ed

Programs that combine workplace training with related instruction, which may include cooperative education programs.

## 59 Other Training Services

Other training services that do not fit into the above categories.

# 60 Non-WIA Funded Training Services

Training services were provided to the individual by non-WIA funding source.

# 61 Co-enrolled Training Services

Training services were provided to the individual by coenrolling into a different WIA funding source.

### YOUTH (younger youth must use only these codes)

#### 70 Summer-related

The WIA youth received summer employment opportunities that are directly linked to academic and occupational learning.

#### 71 Educational Achievement Services

Services include tutoring, study skills training, and instruction leading to completion of secondary school, including dropout prevention strategies, and alternative secondary school service.

### 72 Employment Services

Preparation for and success in employment services include paid and unpaid work experiences, including internships, and job shadowing, and occupational skill training.

## 73 Citizen and Leadership Services

Services are intended to develop the potential of youth as citizens and leaders and include leadership development opportunities, which may include community service and peer-centered activities encouraging responsibility and other positive social behaviors during non-school hours.

#### 74 Other Youth Services

Additional supports for youth services include providing mentoring, comprehensive guidance and counseling, which may include drug and alcohol abuse counseling and referral, primarily provided to assist a youth in achieving employment-related success.

#### 75 Non-WIA Funded Youth Services

Youth services were provided to the individual by non-WIA funding sources.

#### 76 Co-enrolled Youth Services

Youth services were provided to the individual by coenrolling into a different WIA funding source.

#### **MISCELLANEOUS**

#### 80 Other JTPA

This field is for clients who were transitioned from JTPA to WIA and received miscellaneous activities that were allowable under JTPA but are not allowable under WIA.

#### 81 Supportive Services

Services such as transportation, child-care, dependentcare, housing, and payments, which are necessary to enable an individual to participate in activities authorized under Title I of WIA.

### 82 Needs-related Payments

### Adults/Dislocated Workers in Training Services:

Funds allocated to a local area that may be used to provide needs-related payments to adults and dislocated workers, respectively, who are unemployed and do not qualify for (or have ceased to qualify for) Unemployment Insurance compensation for the purpose of enabling such individuals to participate in programs of training services.

#### **Additional Eligibility Requirements:**

A dislocated worker who has ceased to qualify for Unemployment Insurance compensation may be eligible to receive needs-related payments **only** if such worker was enrolled in the training services by the end of the 13th week after the most recent layoff that resulted in a determination of the worker's eligibility for employment and training activities for dislocated workers under this subtitle: **OR** 

If later, by the end of the 8th week after the worker is informed that a short-term layoff will exceed sixmonths.

Also, the individual did not qualify for or must have ceased to qualify for Unemployment Insurance compensation or trade adjustment assistance under TAA or NAFTA-TAA in order to be eligible to receive needs-related payments.

### Youth in Training

Stipends for such activities as GED completion are allowable expenditures under the WIA youth program, provided the provision of a stipend is included in the client's individual needs assessment and individual service strategy. Provision of stipends must also have been approved in the local plan.

# 83 Planned Break in Service: Delay in Training

This activity code should be used to identify clients who have a planned gap in service of greater than 90 days so they will not be considered as exited. The gap in service **must** be due to a delay before the beginning of training. Service providers should document any gap in service that occurs with a reason for such a gap in service. Once a client has not received any WIA funded or partner services for 90 days or more they **must** be exited from the system.

For younger youth only, use of this activity code **must** be tied in with a goal code. Use of activity code 83 will "stop the clock" on the one-year time limit to achieve the goal identified.

#### 84 Non-WIA Funded Miscellaneous

Miscellaneous services were provided to the individual by non-WIA funding sources.

#### 85 Co-enrolled Miscellaneous

Miscellaneous services were provided to the individual by co-enrolling into a different WIA funding source.

Activity Code	86 Planned Break in Services: Health Medical					
(Continued)	This activity code should be used to identify clier who have a planned gap in service of greater than a days so they will not be considered as exited. The gap is service <b>must</b> be due to a medical/health condition that prevents an individual from participating services. Service providers should document any gap in service that occurs with a reason for such a gap service. Unless a planned break in service recorded, a client who has not received any W funded or partner services for 90 days or more <b>must</b> be exited from the system.					
	For younger youth only, use of this activity code does not have to be tied to a specific goal code. Use of activity code 86 will "stop the clock" on the one-year time limit for all goals associated with the client.					
	90:99 Optional Local Use					
	Activity codes 90 to 99 are provided for the optional use of the local areas.					
10 Agency Code (Optional)	Record the 4-character code that has been assigned by the Local Workforce Investment Area to the service provider that provides the service.					
	Use the <b><f1></f1></b> key to display a window of valid agency codes.					
11 State Provider ID	Record the provider code from the Eligible Training Provider List (ETPL) that identifies the school/agency that provided the training activity. Leave this field blank for youth, customized training or OJT enrollments, and non-training activities, as it does not apply.					
	The provider code may be obtained from the Print ETPL List (PETP) generated form in the JTA system by downloading the information for your county or for the provider at <a href="etpl.edd.ca.gov/wiaetpltp.asp">etpl.edd.ca.gov/wiaetpltp.asp</a> .					
12 Program Code	Record the 14-digit program code from the ETPL or at <a href="etpl.edd.ca.gov/wiaetpltp.asp">etpl.edd.ca.gov/wiaetpltp.asp</a> that identifies the program activity. Leave this field blank for youth, customized training or OJT enrollments, and non-training activities, as it does not apply.					

13 Job Code (Optional)	Basic skills, work readiness, and GED will not have a job code. This field should be left blank if it does not apply.		
	Enter the 6-digit Standard Occupational Classification (SOC) code, 8-digit O*Net 3.0 Code, 9-digit Dictionary of Occupational Titles (DOT) code, the 5-digit Occupational Employment Survey (OES) code, or the 5 or 6-digit O*NET code that best describes the training occupation. If the client is to receive classroom occupational skills training, the six-digit Classification of Instructional Programs (CIP) code may be entered. If training is to be provided for more than one occupation, enter the code for the most significant occupational training received.		
14 Begin Date	Enter the first date the client received services and/or training. Enter in the format of "MM/DD/YYYY". This date must be on or after the application date.		
15 Est/End Date	This field has a dual purpose. First, record the estimated end date for the activity (MM/DD/YYYY); update it to the actual date of completion of the activity when services have been provided.		
16 ITA Amount Used (Optional)	When services have been provided, record the cumulative dollar ("00000.00") amount expended from the ITA for this activity, if it was an ITA activity.		
17 Completion Code (Optional)	When services have been provided, record the code that best describes the completion status of this activity:  1		

#### 18 Goal Code

The goal code is optional for adults, but required for youth. From the list below, select and record the goal code of the activity provided to the youth client. A youth who is determined to be basic literacy skills deficient must set a minimum of one basic skills goal. The goal must be set within 30 days of enrollment. A maximum of three goals may be set for a youth in one calendar year. Goals may be progressive, i.e., achieve 7th grade reading skills, achieve 8th grade reading skills, etc.



The **<F1>** key will display a help window with a list of valid goal codes.

# **BASIC SKILLS (Activity Code 71)**

**001** Reading Comprehension

**002** Math Computation

**003** Writing

004 Speaking

005 Listening

006 Problem Solving, Reasoning, Decision Making

013 ESL/VESL

015 Life Skills

#### OCCUPATIONAL SKILLS (Activity Code 72)

007 Perform Actual Tasks

**008** Familiarity with Procedures, Tools

**016** Technology (computer skills)

**019** Information Skills

# **WORK READINESS SKILLS (Activity Code 72):**

009 World of Work Awareness

**010** Labor Market Knowledge

011 Career Planning

**012** Job Search Techniques

Goal Code	CITIZEN/LEADERSHIP SERVICES (Activity Code 73):
(Continued)	014 Leadership
	017 Allocates Resources
	018 Teamwork
	020 Interpersonal Skills
Enrolling Staff Signature	The enrolling staff responsible for completion of this form must sign here.
19 Enrolling Staff ID	Record the staff identification number assigned by the subgrantee for the person responsible for completion of this form.
	If the enrolling staff ID is not known, you may use the <f1> key to display a list of valid ID numbers.</f1>
Date	Record the date the enrolling staff member signed the enrollment form (MM/DD/YYYY).



Upon completion of all the appropriate fields, the record may be filed by pressing the **<F5>** key. At that time the activity and goal tables in the database will be updated.

## **Function Keys**

The following are the function keys that are available in this program:

<f4></f4>	This function is NOT operational in this form.
<f5></f5>	At the time of filing, if the case number is auto-generated, the following prompt will be displayed:
	"Please record auto-generated data. Press any key to continue."
	For each row in the scrolling region containing data, if the activity record exists, update the record, otherwise insert the record. For any row that was cleared, delete the activity record.
<f6></f6>	This record may not be deleted if there is an activity, goal, or exit record linked to this case number. If an activity, goal, or case record is linked to this case, the following message will be displayed:
	"Cannot delete, case has activity (or goal or exit) data."
	You must delete all subsequent records, including activities, before deleting this one.
<f7></f7>	Page back to previous page.
<f8></f8>	Page forward to next page.
< Shift F6> or <f16></f16>	This function key allows the user to alternate between the scrolling region and the non-scrolling region of the screen.
<shift f7=""> or <f17></f17></shift>	This function key will call the Display Client History module.
<shift f8=""> or <f18></f18></shift>	When the cursor is placed in the Activity Code field (09), this key is used to remove an activity from the record. It will not delete the whole case record, but rather delete one activity. Otherwise, it behaves in normal fashion

All other function keys will operate in the normal mode.

Chapter

4

# **Enter WIA Goals Form (EWIG)**

The Enter Workforce Investment Act (WIA) Goals form (EWIG) is used to record the goals that are set for and attained by a WIA youth client for performance measurement. Mandatory completion of this form is required for all youth ages 14-18.

The Department of Labor allows the maximum of three reportable goals per enrollment year to be set for the purpose of the youth skill attainment rate performance measure. A *maximum* of three primary goals per person in each enrollment year is allowable in order to prevent the setting of multiple minimum-level skill goals. There are three goal types: basic skills, occupational skills and work readiness. Clients may have any combination of the three types of skill goals. A youth who is determined to be basic skills deficient **must** have a minimum of one basic skill goal set as the first goal. If the client is not basic skills deficient and therefore does not have a basic skills goal, the individual must have a work readiness and/or an occupational skills goal if they are an in-school youth. If the client is an out of school youth (not in need of basic skills), it is a local option whether or not a work readiness skills goal and/or an occupational skills goal is necessary (Ref. TEGL 3-99, p 22).

Once a youth is registered, one goal per enrollment year is **required** for all in-school youth and any appropriately assessed out-of-school youth (youth 14-18 for goal setting purposes) that need to attain basic skills, work readiness skills, or occupational skills. At least one goal must be set within one month after Enrollment/Registration and must be recorded as being set **on** the date of Enrollment/Registration.

Because of the performance measurements on goals achieved, goals should be chosen which can be reached reasonably within one year of identification. Setting larger goals needing longer duration will result in negative performance evaluations. New goals may be set as initial goals are achieved.

This form will be used in two steps. Step one will be the establishment of a goal(s). At the establishment of a goal, the result code and date attained will not be completed. When the goal(s) have been reached or the one-year allowed period has expired, the result code and date attained must be completed in order to receive credit for the skill attainment outcome.

A line on the goal form will be used for each specific goal. Several goals might be set for one goal type. For example, a Basic Skills goal (01) might include reading comprehension (01) and writing (03).

#### See the example below:

Primary Goal	Goal Type	Goal Code	Goal Description	Date Set	Result Code	Result Description	Date Attained
1	1	001	Course to increase reading comprehension by one grade level.	07/01/02	1	Increased reading comprehension by one grade level. ATTAINED	12/01/02
1	1	003	Class instruction that will improve minimal writing skills.	12/01/02	1	Improved writing skills. ATTAINED	05/01/03
1	2	800	Train to perform actual work-related tasks.	05/01/03	2	Client dropped out of class. NOT ATTAINED	05/15/03
1	2	009	Familiarize client tools and equipment for job	07/05/03			



# WORKFORCE INVESTMENT ACT GOALS

Subgr	antee Name		
01 C	ase Number		
Applic	ation Number		
02 A	gency Code		
Social	Security Number		

Last Name				First Name / Midd	le Initial			
Primary Goal	Goal Type	Goal Coo	de Goal Description	Date Set	Result (	Code	Result Description	Date Attained
,	21		·					
Staff Signature				03 Goals Staff II	D		Date	
Primary Goal Code		(	Goal Type		F	Result (	Code	
1 Primary Goal		1			1		ed Goal	
2 Not Primary Goal		2			2	Set, C	Goal Not Attained	
Goal Code			Tronk readminess exime					
BASIC SKILLS		(	OCCUPATIONAL SKILLS		V	VORK RE	ADINESS	
001 Reading Comprehension			007 Perform Actual Tasks				ld of Work Awareness	
			008 Familiarity With Proced	lures, Tools			or Market Knowledge eer Planning	
			016 Technology 019 Information Skills				Search Techniques	
005 Listening			717 Illiothiation Skills		0	114 Lead	dership	
006 Problem Solving, Reasoning	g, Decision Makir	ng			0	17 Allo	cates Resources	
013 ESL / Vocational ESL 015 Life Skills						118 Teai 120 Inter	m Work personal Skills	

#### **Sample Entry Screen**

The mnemonic for accessing the entry data screen is located in the MWIS Workforce Investment Act Screens menu option within the MWIA Workforce Investment Act menu option. The fastest method to activate the program is by entering the program's mnemonic "EWIG" anywhere within the menu environment. After entering the mnemonic, the following data entry screen is displayed:

#### **Enter WIA Goals Form**

EWIG	Enter WIA Goals Form	ADD
01 Case Num App Num 02 Agency Cd	Name SSN Grnt Cd Grnt Desc 03 Goals Staff ID	
Primary Goal Goal Type	Goal Goal Date Result Date Code Description Set Code Description Attained Attained Code Description Attained Code Code Description Code Code Description Code Code Code Description Attained Code Code Code Code Code Code Code Co	ed / / / / / / / /

#### **Line Item Instructions**

The following are line item instructions for the WIA Goals form. These instructions are intended to assist you with completion of this form. These instructions also provide information on using the Job Training Automation (JTA) system.



For detailed instructions on the JTA system, please refer to the instructions marked with this icon.

T-		
	Subgrantee Name (Optional)	Record the name of the subgrantee or three-digit subgrantee alpha code. This is an optional entry.
01	Case Number	Record the seven-digit enrollment number from the WIA Enrollment/Registration form (EWIE).
		This must be a case that already has been entered into the JTA system. If the client has not yet been enrolled, or the enrollment has not yet been input, the following error message will be displayed:
		"No Record Found."
		If this message appears, make sure the WIA enrollment has been entered for this client. You may use the Query Client History (QCH) <b><shift f7=""></shift></b> to view the history information.
		Once a valid enrollment number has been entered, application number, the client's social security number, name, grant code and grant description will be displayed.
	Application Number	Record the application number as it appears on the Application form (EWIR).
		This field will be displayed, once the Case Number has been entered, as will the Social Security Number, client name, grant code and grant description will be displayed.
02	Agency Code (Optional)	Record the code that has been assigned by the subgrantee to the service provider that completes the goal form. This is an <i>optional</i> entry.
		If the agency code is not known, use the <b><f1></f1></b> key to display a window of valid agency codes.
	Social Security Number	Record the client's SSN. Compare the SSN entered here to the SSN shown on the Application form to verify its accuracy.

Last Name, First Name, Middle Initial	Record the client's last name, first name, middle initial, and compare it with the application form to verify its accuracy.			
Primary Goal	Select the appropriate number. The Department of Labor allows the maximum of three primary goals per program year to be set for the purpose of the youth skill attainment performance measurement. The subgrantee determines the three goals to be measured for the client by noting the goal as a primary goal, #1.			
	1 Primary Goal			
	This goal will be used in the performance calculations. Three primary goals per program year are allowable.			
	2 Not Primary Goal			
	This goal will not be used for performance.			
	Note: If the subgrantee notes no goals as primary for a client, JTA will pick the first goal listed for that client as a primary one to be used for performance calculations.			
Goal Type	A youth who is determined to be basic literacy skills deficient must have a minimum of one basic skills goal set. One goal per program year is <b>required</b> for all in-school youth and any appropriately assessed out-of-school youth that need to attain basic skills, work readiness skills, or occupational skills. Once a goal is set, it cannot be deleted. However, new goals may be set after initial goals are achieved. A previously set non-primary goal <b>may not</b> be changed to a primary one.			
	Select the goal type in which the client is enrolled from the following:			
	1 Basic Skills			
	Include reading comprehension, math computation, writing, speaking, listening, problem solving, reasoning, decision-making and the capacity to use these skills.			

# Goal Type (Continued)

#### 2 Occupational Skills

Include the proficiency to perform actual tasks and technical functions required by certain occupational fields at entry, intermediate or advanced levels. Secondary occupational skills entail familiarity with and use of set-up procedures, safety measures, work-related terminology, record keeping and paperwork formats, tools, equipment and materials, and breakdown and clean-up routines.

#### 3 Work Readiness Skills

Include world of work awareness, labor market knowledge, occupational information, values clarification and personal understanding, career planning and decision-making, and job search techniques (resumes, interviews, applications, and follow-up letters). These skills also encompass survival/daily living skills such as using the phone, telling time, shopping, renting an apartment, opening a bank account, and using public transportation. Also, include positive work habits, attitudes, and behavior such as punctuality, regular attendance, presenting a neat appearance, getting along and working well with others, exhibiting good conduct, following instructions and completing tasks, accepting constructive criticism from supervisors and coworkers, showing initiative and reliability, and assuming the responsibilities involved in maintaining a job. This category also entails developing motivation and adaptability, obtaining effective coping and problem-solving skills, and acquiring an improved self-image.

If the goal type is not known, use the **<F1>** key to display a window of valid goal types.



Goal Code	Record the goal code for the activity provided to the youth client from the list below.			
	001	Reading Comprehension		
	002	Math Computation		
	003	Writing		
	004	Speaking		
	005	Listening		
	006	Problem Solving, Reasoning, Decision-making		
	007	Perform Actual Tasks		
	800	Familiarity with Procedures, Tools, Equipment		
	009	World of Work Awareness		
	010	Labor Market Knowledge		
	011	Career Planning		
	012	Job Search Techniques		
	013	ESL/VESL		
	014	Leadership		
	015	Life Skills		
	016	Technology (computer skills)		
	017	Allocates Resources		
	018	Team Work		
	019	Information Skills		
	020	020 Interpersonal Skills		
		goal code is not known, use the <b><f1></f1></b> key to display a ow of valid goal codes.		
Goal Description	Reco	ord the description of the goal noted above.		
		ncise description of the goal code will be displayed the Goal Code is entered.		

#### Date Set

Record the date the goal is established for the client (MM/DD/YYYY).



At least one goal must be set within one month after Enrollment/Registration and must be recorded as being set <u>on</u> the date of Enrollment/Registration. (See form, EWIE.)

New goals may be set as initial goals are achieved. Skill goals must be achieved within one year of their beginning date. Once the goal has been set and entered, it cannot be deleted. Primary skill goals will begin to count toward the skill attainment performance measurement as of their date set.

The target date set can only be extended if the client has a planned gap in service in which they are placed in a hold status, does not receive services and plans to return to the program. To extend the target date, use the hold status Miscellaneous Activity Code from the EWIE, #83, Planned Break In Services: Delay in Training, or, #86, Planned Break In Services: Health/Medical, if appropriate and documented. When the client enters a hold status, the one-year clock for the goal target date stops. The clock resumes once the client is no longer in a hold status.

#### Result Code

Select the appropriate number that describes the result of the goal activity above.

#### 1 Attained Goal

Attainment of a goal is to be based on individual assessments using widely accepted and recognized measurement/assessment techniques.

#### 2 Set, Goal Not Attained

Include goals whose anniversary date has passed without attainment of the goal. The anniversary date is the date one year after the date the goal was set.



If the result code is not known, use the **<F1>** key to display a window of valid result codes.

#### Result Description

Describe the result of the goal activity listed above. This is an optional field.



A concise description of the result entered will display.

Date Attained	Record the date the goal was determined to be attained (MM/DD/YYYY). This is the date on which the individual's skills were tested or otherwise assessed.
	Date entered may not be a future date, and must be on or after the date set.
Staff Signature	The staff responsible for completion of this form must sign here.
Goals Staff ID	Record the staff's assigned identification number.  If the staff ID is not known, you may use the <b><f1></f1></b> key to display a help window. This field is required.
Date	Record the date the staff member signed the goal form. (MM/DD/YYYY).



Upon completion of all the appropriate fields, the record may be filed by pressing the **<F5>** key. At that time the goal table in the database will be updated.

#### **Function Keys**

The following are the function keys that are available in this program:

<f4></f4>	This function is NOT operational in this form.
<f5></f5>	If the client is a youth (Eligibility Codes of F, G, I, or J) less than 19 years old, at least one of the primary goals must have a Date Set equal to the enrollment date. If not, the following message will be displayed and the cursor will go to the Date Set of the first primary goal on the screen.
	"First Date Set must be the same as case enrollment date."
<f6></f6>	If there is no exit record linked to the application for this case, then the goals may be deleted (all goal records for the case will be deleted). If an exit record is linked to the application for this case, the following message will be displayed:
	"Cannot delete, application has been exited."
<shift f8=""> or <f18></f18></shift>	If pressed on first field of the goal row, the entire row will be cleared. Otherwise, the function key behaves normally.

All other function keys will operate in the normal mode.

Chapter

5

# **Enter WIA Exit Form (EWIT)**

The Enter Workforce Investment Act (WIA) Exit form (EWIT) is used to record the exit of a client from the WIA program and to track post-program services. This form should only be used when a client has completed **all** services, including partner services, or when they are not expected to return. WIA performance measures require staff to focus on follow-up and post-program services in order to meet the performance levels set.

If there are activities on the Enrollment form that do not have a completion date, or goals on the Goal form that do not have a completion date, this form may not be filed. You must return to the enrollment and/or goal form and indicate completion dates for all activities and goals.

The terms credential, certificate and diploma are used interchangeably throughout the WIA forms. Therefore, a definition of the term "credential" is provided here as it is defined by the Department of Labor in Training and Employment Guidance Letter 7-99.

Credential—nationally recognized degree or certificate or State/locally recognized credential. Credentials include, but are not limited to, a high school diploma, GED or other recognized equivalents, post-secondary degrees/certificates, recognized skill standards, and licensure or industry-recognized certificates. Include all State Education Agency recognized credentials. In addition, States should work with local Workforce Investment Boards to encourage certificates to recognize successful completion of the training services that are designed to equip individuals to enter or re-enter employment, retain employment, or advance into better employment. Credentials can be obtained while a person is still participating in services.



# WORKFORCE INVESTMENT ACT EXIT

Su	bgrantee Name
01	Application Number
02	Agency Code
So	cial Security Number

Last Name						First Name / Middle Initial						
03 Exit Codes  Exit Codes (Select up to three codes)  01 Entered Employment  02 Called Back / Remained With Lay  03 Entered Advanced Training  04 Entered Postsecondary Education  05 Attained Recognized Certificate /  06 Planned Services Completed					09 Family Care 10 Health / Medical					<ul> <li>13 Institutionalized</li> <li>14 Voluntary Other</li> <li>15 Objective Assessment Only</li> <li>16 Returned to Secondary Education (Youth Only)</li> <li>17 Soft Exit</li> <li>18 Reservists Recalled</li> </ul>		
04 Exit Da	04 Exit Date 05 Soft Exit Determination Date			06 Degree Attained 1 Yes 2 No, credential intended 3 No, credential pending 5 No training services provided  07 Date Degree or Certificate Attained  Attained				1 High 2 Equiv 3 AA or 4 BA or 5 Occu 6 Occu Crede	1 High School Diploma 2 Equivalency / GED 3 AA or AS Diploma / Degree 4 BA or BS Diploma / Degree 5 Occupational Skills License 6 Occupational Skills Certificate or Credential			
09 Entered 1 Yes 2 No	d Postsecon	dary Educat	ion	10 Entered Adv 1 Yes 2 No	1 Yes 1 Yes				12 Entered Qualified Apprenticeship 1 Yes 2 No			
13 Date En	nployed		14 Employer	Number	15 Emplo	ime		1				
Employer Ad	ddress				Employer City / State					Employer ZIP		
16 Employ	er Contact				17 Conta	ct Pho	ne	18 Job Code 19 Hours Per Week			ours Per Week	
20 Hourly	Wage	1 Ye 2 No		loyment	22 Determination Method 1 Training to job 2 Industry to training 3 Other			1 Yes			on-Traditional mployment es o	
Exit Staff Sig	gnature				25 Exit S		26 Update CI Y Yes N No	ent Info? Date				
Post Exi			20 Description						20 Posin Dat	•	30 End Date	
27 Service	Code		28 Description					29 Begin Dat	e 	30 End Date		
02 Employr 03 Addition 04 Citizen a	m Service C onal Achiever ment Service nal Youth Sup and Leadersh up Services	ment s pport										

#### **Sample Entry Screen**

The mnemonic for accessing the entry data screen is located in the MWIS Workforce Investment Act Screens menu option within the MWIA Workforce Investment Act menu option. The fastest method to activate the program is by entering the program's mnemonic "EWIT" anywhere within the menu environment. After entering the mnemonic, the following data entry screen is displayed:

#### **Enter WIA Exit Form**

ΕV	/IT	Ent	ter W	IA Exit Form
03 04 05 06 07 08 09 10 11 12 13	App Num Nam Agcy Cd SSN Exit Codes Exit Date Soft Exit Determination Dt Degree Attained Date Degree/Cert Attained Type of Degree Attained Entered Post-Scndry ED Entered Advanced Trng Entered Military Service Entered Apprenticeship Date Employed / / Employer Number	_		19 Hours Per Week 0.0 20 Hourly Wage 0.00 21 Trng Reltd Employment 22 Determination Method 23 Health Benefits 24 Non-Trad Employment 25 Exit Staff ID 26 Update Client Info Post Exit Services Srv Descrpt Bgn Dt End Dt ////////////////////////////////////
16 17	Employer Name Address CSZ Employer Contact Contact Phone Job Code			-

#### **Line Item Instructions**

The following are line item instructions for the WIA Exit form. These instructions are intended to assist you with completion of this form. These instructions also provide information on using the Job Training Automation (JTA) system.



For detailed instructions on the JTA system, please refer to the instructions marked with this icon.

open							
owing open ill be							
open ill be							
ill be							
ill be							
,,							
Į.							
"Open activities/goals found. Cannot exit app."  After the number is entered, the client SSN and name will be displayed. Compare what is displayed with what is recorded in those fields on the form.							
Record the code that has been assigned by the subgrantee to the service provider that completes the exit form. This is an optional field.							
Press <b><f1></f1></b> key to display a list of valid agency codes.							
Record the client's SSN. Compare the SSN entered here to the SSN shown on the application form to verify its accuracy.							
Record the client's last name, and compare it with the application form to verify its accuracy.							
and acy.							
Jp to							
The client entered full or part-time employment. This includes clients who enter the military and/or a qualified apprenticeship program.							
n the							
1							

# Exit Codes (Continued)

#### 03 Entered Advanced Training

The client entered advanced training.

#### 04 Entered Post-secondary Education

The client entered an accredited degree-granting institution that leads to an academic degree (AA, AS, BA or BS).

#### 05 Attained Recognized Certificate/Diploma/Degree

The client obtained a nationally recognized degree or certificate or a state/locally recognized credential.

#### 06 Planned Services Completed

The individual's WIA service goals were completed, and the individual is no longer receiving services (excluding follow-up services).

#### 07 Planned Services Not Completed

The individual's WIA service goals were not completed, and the individual is no longer receiving services (excluding follow-up services).

#### **08** Lacks Transportation

The client is without a means of transportation.

#### 09 Family Care

The client is responsible for the care of one or more family members, which precludes entry into employment or continued participation in WIA. This does not apply to youth.

#### 10 Health/Medical

The client is receiving medical treatment, which precludes entry into employment, or continued participation in WIA other than temporary conditions expected to last less than 90 days.

#### 11 Cannot Locate

The client cannot be located after utilizing the address, phone number, and additional contact information provided by the client to locate them.

#### 12 Death

The client is deceased.

# Exit Codes (Continued)

#### 13 Institutionalized

The client resides in an institution or facility providing 24-hour support such as a hospital or a prison and is expected to remain in that institution for at least 90 days.

#### 14 Voluntary Other

The client voluntarily left the WIA program for reasons other than listed above.

#### 15 Objective Assessment Only

The client received only objective assessment services. After July 1, 2000, those clients exited with objective assessment only **will** be counted in WIA performance measure calculations.

#### 16 Returned to Secondary Education (Youth Only)

The youth exited WIA Services and was attending secondary school at exit. In-school youth that exit and return to secondary school following participation in summer employment opportunities are excluded from the younger youth diploma or equivalency rate and the younger youth retention rate performance measures. These youth are only included in the younger youth skill attainment rate performance measure. Out-of-school youth are included in all three of the younger youth performance measures because, by definition, they would not be returning to school following summer employment opportunities.

#### 17 Soft Exit

A client does not receive any WIA-funded or non-WIA funded partner services for 90 days and is not scheduled for future services except follow-up services (soft exit). If a client is soft exited, the exit date will be the ending date of the **last** activity prior to the expiration of the 90 days.

#### 18 Reservists Recalled

Reservists called to active duty that choose to return to WIA



Press **<F1>** key to display a list of valid exit codes. Select from that list the code/s desired and press **<Enter>**.

#### 04 Exit Date Record the last date (MM/DD/YYYY) on which WIA Title I or partner services were received by the individual, excluding follow-up services. The exit date must be on or after the end date of the last activity (see EWIE field 15) received prior to the client exiting from the program. There are two ways to determine exit: A. A client has a date of case closure, completion or known exit from WIA-funded or non-WIA funded partner services (hard exit); B. A client does not receive any WIA-funded or non-WIA funded partner services for 90 days and is not scheduled for future services except follow-up services (soft exit). If a client is soft exited, the exit date will be the ending date of the **last** activity prior to the expiration of the 90 days. A planned gap in service of greater than 90 days should not be considered an exit if the gap is due to a delay before the beginning of training or a health/medical condition that prevents an individual from participating in services. This should be identified as activity code #83, on the EWIE. Service providers should document any gap in service that occurs with a reason for the gap. The exit date must be equal to or greater than the application and enrollment dates and on or after the last activity completion date. It cannot be a future date. 05 Soft Exit This field represents the day a soft exit is determined (not **Determination Date** the last day of services received). A client does not receive any WIA-funded or non-WIA funded partner services for 90 days and is not scheduled for future services except follow-up services (soft exit). 06 Degree Attained Select the appropriate number. 1 Yes No, credential intended No, credential not intended No, credential pending

No training services provided

Press **<F1>** key to display a list of valid exit codes. Select

from that list the code/s desired and press **<Enter>.** 

07 Date Degree or Certificate Attained	Record the date the client received a degree or certificate (MM/DD/YYYY), if applicable. This date must be on or prior to exit date.						
08 Type of Degree	Select the appropriate number.						
Attained	1 High School Diploma						
	2 Equivalency / GED						
	3 AA or AS Diploma / Degree						
	4 BA or BS Diploma or Degree						
	5 Occupational Skills License						
	6 Occupational Skills Certificate or Credential						
	7 Other						
	Press <b><f1></f1></b> key to display a list of valid exit codes. Select from that list the code/s desired and press <b><enter></enter></b> .						
09 Entered Post- secondary Education (Optional)	Select the appropriate number. <i>Post-secondary education</i> is defined as a program at an accredited degree-granting institution that leads to an academic degree (AA, AS, BA or BS).						
	1 Yes						
	2 No						
10 Entered Advanced Training (Optional)	Select the appropriate number. Advanced training is an occupational skills and employment or training program, not funded under WIA title I, which does not duplicate training received under WIA title I. Training that leads to an academic degree (e.g., AA, AS, BA, BS) should be categorized as post-secondary education and not reported as advanced training. Advanced training may be provided by a One-Stop partner following the exit of the registrant from WIA. Advanced training does not include training funded partially or wholly with WIA funds. An example of advanced training is a community college program that does not lead to an advanced degree.  1 Yes						
	2 No						
	Z INU						

11 Entered Military	Select the appropriate number. <i>Military service</i> is defined						
11 Entered Military Service	as reporting for active duty and is considered employment for the purpose of the youth retention rate performance measurement.						
	Yes						
	No						
12 Entered Qualified Apprenticeship	Select the appropriate number. Qualified apprenticeship is defined as a program approved and recorded by the ETA/Bureau of Apprenticeship and Training (BAT) or by a recognized State Apprenticeship Agency (State Apprenticeship Council). Approval is by certified registration or other appropriate written credential. Apprenticeship is considered employment for the purpose of the youth retention rate performance measurement.  1 Yes						
	2 No						
13 Date Employed (Optional)	Record the date (MM/DD/YYYY) the client entered employment. This date must be on or prior to exit date.						
14 Employer Number (Optional)	Record the locally assigned number for the employer.  If the number is unknown, move to the employer name field. Once the employer number has been correctly entered or created, the Employer Name, address, and phone will be displayed.						
15 Employer Name	Record the business name of the employer for whom the client is working.						
	If the employer number is unknown, enter the first few characters of the name, then press <f1> key. A list of employers will be displayed, and the correct one may be selected. If the employer does not appear on the list, select "add employer" and proceed with the process of creating a new employer number.</f1>						
Employer Address	Record the business address of the employer for who the client is working.						
Employer City / State	Record the city and state of the employer.						
Employer Zip	Record the Zip code of the employer.						
	Enter <b>XX</b> for a state outside the US, and " <b>00000</b> " for a zip outside the US.						

n <del></del>										
16	Employer Contact (Optional)	Record the name of the contact person at the employer's place of business who can verify employment information.								
17	Contact Phone (Optional)	Record the employer's contact telephone number including the area code.								
18	Job Code (Optional)	Record the SOC/O*NET, OES, ONET3 or DOT code that best describes the individual's type of employment as well as the title of the job.								
19	Hours Per Week (Optional)	Record the number of hours per week the client is working or is scheduled to work.								
20	Hourly Wage (Optional)	Record the hourly wage at exit. If the individual is paid by commission or receives a salary, convert this to an hourly wage by dividing the amount paid by the number of hours the individual is expected to work. The term "hourly wage" includes any bonuses, tips, gratuities, commissions, and overtime pay earned.								
21	Training Related	Select the appropriate number.								
	Employment	<ul> <li>Yes—The individual is placed into employment that uses a substantial portion of the skills taught in the training received by the individual.</li> <li>No</li> </ul>								
		9 Not Applicable								
22	Determination Method	If Item #21 indicates "Yes", Select the appropriate number that indicates the method used to determine if employment is training related. Otherwise, skip.								
		<b>1 Training to job—</b> Comparison of the occupation coed between the training activity and the job.								
		2 Industry to training—Comparison of the industry of employment with the occupation of training using an appropriate crosswalk.								
		3 Other—Another method was used.								
		Press <b><f1></f1></b> key to display a list of valid exit codes. Select from that list the code/s desired and press <b><enter></enter></b> .								
23	Health Benefits	<ul> <li>Select the appropriate number.</li> <li>1 Yes—The employment provides the individual with health insurance benefits.</li> <li>2 No</li> </ul>								

24	Non-Traditional Employment	Select the appropriate number. Both males and females can be in nontraditional employment. Refer to WIA Standardized Record Data, Attachment E, Appendix D, for information that may be used for determining non-traditional employment.							
		1 Yes—The client has been placed in an occupation or field of work for which individuals of the client's gender comprise less than 25% of the individuals employed in such occupation or field of work [WIA Section 101(26)].							
		2 No							
	Exit Staff Signature	The staff responsible for completion of this form must sign here.							
25	Exit Staff ID	Record the assigned staff identification number of the staff responsible for the completion of the form.							
		Press <b><f1></f1></b> key to display a list of Staff ID numbers.							
26	Update Client Info	Enter "Y" to call up blank EWIR form and update client information. Enter "N" to continue to the next field.							
	Date	Record the date the staff member signed the exit form (MM/DD/YYYY).							



Upon completion of all entries, press the **<F5>** key to file the record. The following message will appear:

#### "Update Final Post Exit Service Date? (Y/N) N"

If no services were provided after exit, then accept the default of "No." If services were provided, and/or have ended, change "N" to "Y", and enter end date. Multiple services may be entered; see following instructions.

An exit form may not be deleted, once the record has been extracted for Individual Participant Data (IPD).

#### **Post Exit Services**

The following fields are used to track required youth services that are provided after the exit date. The use of this portion of this form is optional for adults. Only post-exit service fields may be updated on this form after the extraction of the IPD record.

#### 27 Service Code

Record the appropriate number for these services. Use one line for each service. There is a maximum of 5 lines and each Service Code can only be entered once. This section is required for youth.

#### 01 Educational Achievement

Include, but are not limited to: Tutoring, study skills training, and instruction leading to completion of secondary school, including dropout prevention strategies, and alternative secondary school service.

#### 02 Employment Services

Include, but are not limited to: paid and unpaid work experiences, including internships, and job shadowing; and occupational skill training.

#### 03 Additional Youth Support

Include, but are not limited to: Providing mentoring, comprehensive guidance and counseling, which may include drug and alcohol abuse counseling and referral, primarily provided to assist a youth in achieving employment-related success.

#### 04 Citizen and Leadership

Include, but are not limited to: Leadership development opportunities, which may include community service and peer-centered activities encouraging responsibility and other positive social behaviors during non-school hours.

#### 05 Follow-up Services

A minimum follow-up period of 12 months is required for all youth that exit the WIA program. Local areas have broad discretion in determining the intensity and type of follow-up services. Examples of follow-up services may include:

- a. Job shadowing;
- b. A "Youth Day" career exploration activity organized at the One-Stop;
- c. Periodic, scheduled group meetings or one-on-one meetings to discuss educational or career options;
- d. Use of technology to explore Web sites and facilitate communication:

Service Code (Continued)	e. Periodic telephone calls to inform youth of on- going activities such as job fairs or other career activities; and						
	f. Adult mentoring and tutoring.						
	This is a scrolling region which displays 14 rows at a time and has a maximum size of 25 rows. Press the <b><enter></enter></b> key at the end of row 14 to display subsequent rows.						
	To remove a code, position the cursor on the line to be removed, in the code field. Press <b><shift f8=""></shift></b> to delete a row.						
	Press <b><f1></f1></b> key to display a list of valid service codes.						
28 Description	Record the description of the service noted above.						
	The description will be displayed when the code is entered.						
29 Begin Date	Record the begin date for the post-program service above (MM/DD/YYYY).						
30 End Date (Optional)	Record the actual end date for the post-program service above (MM/DD/YYYY).						



Upon completion of all the appropriate fields, the record may be filed by pressing the **<F5>** key. At that time the exit and post exit services tables in the database will be updated.

## **Function Keys**

The following are the function keys that are available in this program:

<f4></f4>	This function is NOT operational in this form.							
<f5></f5>	At time of filing, if all post exit service records for the application number have a service end date, or there are no post exit service records for the application number, the following prompt will be displayed:							
	"Final Post Exit Service? (Y/N)"							
	Default response is set to "N"							
	If there is a final post service date, the following prompt will be displayed:							
	"Update Final Post Exit Service Date? (Y/N)							
	If the exit record exists, update the record, otherwise insert the record. For each row in the scrolling region containing data, if the post exit service record exists, update the record, otherwise insert the record. For any row that was cleared, delete the record.							
<f6></f6>	The exit record may not be deleted if there are post exit services for the application number. To delete the exit record, delete all post exit service records and then delete the exit record.							
<f7></f7>	Page back to previous page.							
<f8></f8>	Page forward to next page.							
<shift f8=""> or <f18></f18></shift>	If pressed while the first field of a row in the scrolling region is selected, the entire row will be cleared. Otherwise, it behaves in normal fashion							

All other function keys will operate in the normal mode.

Chapter

6

# **Enter WIA Follow-Up Information Form (EWIF)**

The Workforce Investment Act (WIA) Follow-up Information form (EWIF) is used to record the follow-up contact information with an exited WIA client. Follow-up Contact Information is MANDATORY for four quarters after a client's exit unless specified otherwise in the entities contract. The 30- and 60-day contacts are optional. The same data should be provided for each of the required reporting periods and the report type is specified in field #03

A follow-up contact is a check to determine a client's employment and educational status after exiting the WIA program. Individuals may be re-evaluated at 30 days after exit and at 60 days after exit for local purposes and at the 1st, 2nd, 3rd, or 4th quarter after the client leaves the program for performance measurement data collection. The same form is used for each contact, with an indicator of the follow-up period being selected.

Follow-up contact may also be used locally to determine the quality of any placement and/or the service providers' overall program, to monitor customer satisfaction and to obtain information on clients that may be used to measure performance outcomes.



# WORKFORCE INVESTMENT ACT FOLLOW-UP INFORMATION

Sul	bgrantee Name
01	Application Number
02	Agency Code
Soc	cial Security Number

Last Name						Firs	st Name / Mid	dle Initial				
03 1 2 3	Follow-up Type (After Exit) 30 Day 60 Day 1st Quarter	4 5 6	2nd Qu 3rd Qua 4th Qua	arter		F	ollow-up Date	3				04 Interview Date
05 01 02 03 04 05						06 07 08 09	Respondent Language Pr Unable Due Died / Incapa	roblem Previ to Illness / D	ented Disabil	Interview lity	xit	
1 2	1				Supplemental Data Verified Employment Status     08     Supplemental Data Verified Employment Status       First Quarter after Exit     Third Quarter after Exit       Employed     1     Employed       Not Employed     2     Not Employed       Not Applicable     3     Not Applicable							
1 High School 2 Equivalency. 3 AA or AS Di				Type of Degree or Certi High School Diploma Equivalency/GED AA or AS Diploma/Degre BA or BS Diploma or Deg	e	e Attained		5 6 7	Occupation Occupation Other		ls License ls Certificate or Credential	
<b>11</b> 1 2	Continuing in Post-Secondary Educa Yes No	tion				12 Continuing in Advanced Training 1 Yes 2 No						
13 1 2	In Military Service         14         In           Yes         1         Ye           No         2         Ne	es	ied Appro	entices	ship 15 Weeks Emp	oloye	d	16 With 1 1 Yes 2 No	Exit E	Employer		17 Actual Hours Worked
			Most	Rec	ent Employer o	r E	mployer	at Follo	w-L	Jp		
18	Date Employed	19	Emplo	yer Nu	ımber	20	Employer	Name				
Employer Address					Em	ployer City, S	State, ZIP					
21	Contact					22	Phone					
23	Job Code	24	Hours	Per We	ee <b>k</b>	25	Hourly Wa	age			26	Follow-up Staff ID

#### **Sample Entry Screen**

The program is located in the MWIR Workforce Investment Act Reports menu option within the MWIA Workforce Investment Act menu option. The fastest method to activate the program is by entering the program's mnemonic "**EWIF**" anywhere within the menu environment. After entering the mnemonic, the following data entry screen is displayed:

#### **EWIF – Enter WIA Follow-up Information Form**

EWIF	Enter WIA Follow-up Form	ADD
01 App Num 02 Agency Cd 03 Follow-up Type Follow-up Date 04 Interview Date 05 Follow-up Result 06 Labor Force Status 07 Supp Data Emp St1 08 Supp Data Emp St2 09 Date Degree / Cert	Name SSN 10 Type of Degree Attained / / 11 Continuing in Post-Sec Educ / / 12 Continuing in Advanced Trng 13 In Military Service 14 In Qualified Apprenticeship 15 Weeks Employed 16 With Exit Employer / / Actual Hours Worked	
Most Recent Employer or 18 Date Emp / / 19 EMP Num 20 EMP Name    Address    CSZ 21 Contact 22 Phone 23 Job Code	Employer at Follow-up  24 Hours per Week 25 Hourly Wage 26 Follow_up Staff	0.0 0.00

#### **Line Item Instructions**

The following are line item instructions for the Follow-up Information form (EWIF). These instructions are intended to assist you with completion of this form. These instructions are also intended to provide information on using the Job Training Automation (JTA) system.



For detailed instructions on the JTA system, please refer to the instruction marked with this icon.

Subgrantee Name (Optional)		Record the name or three-digit alpha code of the subgrantee.								
01	Application Number	Record the application number as it appears on the Application form (EWIR).								
		f an invalid application number is entered, the following error message will be displayed:								
		"No app record found."								
		the application has not yet been exited the following rror message will be displayed:								
		"App must be termed before follow-up."								
		After the application number is entered into the system, the social security number, and client's name will be displayed.								
02	Agency Code (Optional)	Record the code that has been assigned by the subgrantee to the service provider that completes the follow-up form.								
		If the agency code is not known, use the <b><f1></f1></b> key to display a window of valid agency codes.								
	Social Security Number	Record the client's SSN. Compare the SSN entered here to the SSN on the application form to verify its accuracy.								
	Last Name	Record the client's last name, and compare it with the application form to verify its accuracy.								
	First Name / Middle Initial	Record the client's first name and middle initial, and compare it with the application form to verify its accuracy.								
03	Follow-up Type (After Exit)	Select the appropriate number to indicate the period of the follow-up. The 30- and 60-day contacts are optional. The 1st, 2nd and 3rd and 4 <sup>th</sup> Quarter Follow-ups are mandatory unless the entities contract specifies otherwise.								
		1 30 Day								
		2 60 Day								
		3 1st Quarter								
		4 2nd Quarter								
		5 3rd Quarter								
		6 4th Quarter								
		Use the <b><f1></f1></b> key to display a window of valid Follow-up Types.								

Follow-up Date	Generated by the JTA system. Based on the follow-up type and the exit date, the date calculated is the first day this follow-up may be performed and entered into the JTA system.							
04 Interview Date	nter the date (MM/DD/YYYY) of the follow-up interview. his date must be on or after the Follow-up Date but not reater than the date of data entry.							
05 Follow-up Result (Optional)	Select the appropriate number which most close describes the result of the follow-up:							
	01 Complete: All Questions							
	02 Complete Interview: Missing Data							
	03 Respondent Never Located							
	04 Located, but Never Available							
	05 Informant Refused for Respondent							
	06 Respondent Refused Interview							
	07 Language Problem Prevented Interview							
	08 Unable Due to Illness/Disability							
	09 Died/Incapable/Institutionalized After Exit							
	Use the <b><f1></f1></b> key to display a window of valid Follow-up results.							
06 Labor Force Status	Select the appropriate number that describes the situation of the client at follow-up.							
	1 Employed Full-Time							
	2 Employed Part-Time							
	3 Unemployed							
	4 Not in Labor Force							
	5 Status Unknown							
	Use the <b><f1></f1></b> key to display a window of valid Labor Force Status.							

# 07 Supplemental Data Verified Employment Status First Quarter after Exit

Select the appropriate number that describes whether the WIA client's employment status after exit was determined by using a supplemental data verification process. This field applies only to those exiters who were not found in the Unemployment Insurance Base Wage File (BWF). All others Select #3. Local areas must maintain the appropriate documentation verifying employment as required by federal guidance, TEGL 7-99. All data and methods to supplement wage record data must be documented and are subject to audit.

- **1 Employed**—This client was found to be employed in the **first** quarter after exit.
- 2 Not Employed—This client was not found to be employed in the first quarter after exit.
- **Not Applicable—**This client was found in the BWF or supplemental verification was not attempted.

# 08 Supplemental Data Verified Employment Status Third Quarter after Exit

Select the appropriate number that describes whether the WIA client's employment status after exit was determined by using a supplemental data verification process. This field applies only to those exiters who were not found in the Unemployment Insurance Base Wage File (BWF). All others Select #3. Local areas must maintain the appropriate documentation verifying employment as required by federal guidance, TEGL 7-99. All data and methods to supplement wage record data must be documented and are subject to audit.

- **1 Employed**—This client was found to be employed in the **third** quarter after exit.
- 2 Not Employed—This client was not found to be employed in the third quarter after exit.
- **Not Applicable—**This client was found in the BWF or supplemental verification was not attempted.

#### 09 Date Degree or Certificate Attained

Enter the date (MM/DD/YYYY) the degree or certificate, if any, was attained by the client. Leave blank if this does not apply.

17	Actual Hours Worked (Optional)	Record the actual number of total hours the client worked for the employer during the follow-up period, including overtime.
16	With Exit Employer (Optional)	<ul> <li>Select the appropriate number.</li> <li>1 Yes—the client is employed with the same employer as reported at exit.</li> <li>2 No</li> </ul>
15	Weeks Employed (Optional)	Record the number of weeks the client has been employed during the follow-up period.
14	In Qualified Apprenticeship	Select the appropriate number regarding whether the client is in a qualified apprenticeship since exit.  1 Yes 2 No
13	In Military Service	Select the appropriate number regarding whether the client is in military service since exit.  1 Yes 2 No
12	Continuing in Advanced Training	Select the appropriate number regarding whether the client is continuing advanced training since exit.  1 Yes 2 No
11	Continuing in Post-secondary Education	Select the appropriate number regarding whether the client is continuing in postsecondary education since exit.  1 Yes 2 No
10	Type of Degree or Certificate Attained	<ul> <li>Select the appropriate number.</li> <li>High School Diploma</li> <li>Equivalency/GED</li> <li>AA or AS Diploma/Degree</li> <li>BA or BS Diploma or Degree</li> <li>Occupational Skills License</li> <li>Occupational Skills Certificate/Credential</li> <li>Other</li> <li>Leave blank if this does not apply. Field is required if the previous field is completed.</li> </ul>

18 Date Employed	Record the date (MM/DD/YYYY) the client entered new
	employment.
	Cursor will skip this field if client was not employed at termination and follow-up status is unknown. Otherwise the cursor will allow updating of employment information.
19 Employer Number	Record the number assigned to the employer. This information may be taken from the WIA Exit form (EWIT) if the employer information has not changed.
	This information will be displayed from the WIA Exit form (EWIT) if the employer information has not changed. However, it may be updated with new information gained during the follow-up contact.
	Upon entry of a valid employer number, the name address city and zip will be displayed. If the new employer number is not known, clear the existing number, press return to move the cursor to the next field and proceed with finding the employer in the database Employer file.
20 Employer Name	Record the business name of the employer for whom the client is working. This information may be taken from the WIA Exit form (EWIT) if the employer information has not changed.
	If the employer number is unknown, enter the first few characters of the name, then press <f1> key. A list of employers will be displayed, and the correct one may be selected. If the employer does not appear on the list, select "add employer" and proceed with the process of creating a new employer number.</f1>
Employer Address	Enter the business address of the employer for whom the client is working.
Employer City, State, ZIP	Enter the city, state, and ZIP code of the employer for whom the client is working.
21 Contact	Enter the full name of the contact person to verify or discuss the employment. If the personnel office is given, provide the name of the person authorized to hire the client. This information may be used for any of the follow-ups and may be taken from the WIA Exit form (EWIT) if the employer information has not changed.
22 Phone	Enter the telephone number, including the area code, of the employer's contact person.

23 Job Code	Enter the appropriate Dictionary of Occupational Titles (DOT), Occupational Employment Statistics (OES), Occupational Information Network 3 (ONET3) or Standard Occupational Classification (SOC) code for the client's job.
24 Hours Per Week	Enter the number of hours per week the client is working.
25 Hourly Wage	Enter the hourly wage the client is currently receiving. If the individual is paid by commission or receives a salary, you can convert the salary to the hourly wage by dividing the amount paid by the number of hours the individual actually worked. The term "hourly wage" can include any bonuses, tips, gratuities, commissions, and overtime pay earned. The hourly wage collection should be consistent with the manner that the hourly wage is collected on the application form in order for these figures to be used in estimating the earnings gains for the client.
26 Follow-up Staff ID	Enter the assigned staff ID number of the person responsible for completion of this form.
	Use the <b><f1></f1></b> key to display a window of Staff IDs.



Upon completion of all the appropriate fields, the record may be filed by pressing the **<F5>** key. At that time the follow-up table in the database will be updated.

#### **Function Keys**

The following are the function keys that are available in this program:

<f6></f6>	A follow-up form may not be deleted ( <f6) a="" and="" backward.<="" by="" delete="" entered="" first="" follow-up="" into="" is="" jta="" most="" once="" recent="" record="" records="" removing="" subsequent="" system="" th="" the="" unless="" working="" you=""></f6)>							
<shift f7=""> or <f17></f17></shift>	This function key will call the Display Client History module							

All other function keys will behave normally.

Chapter

7

#### **Print WIA Forms**

This chapter provides instructions to retrieve, view, and print the Workforce Investment Act (WIA) forms from the Job Training Automation (JTA) system. The programs consist of the following:

- PWIR Print WIA Application Form
- PWIE Print WIA Enrollment/Registration Form
- PWIG Print WIA Goals Form
- PWIT Print WIA Exit Form
- PWIF Print WIA Follow-up Form

Each program provides an option screen where the WIA application number, or the WIA case number in case of the PWIE, is entered for the desired form. With the exception of the PWIF, the user also has the option of printing the form including a signature block

The programs are located in the MWIR Workforce Investment Act Reports menu option within the MWIA Workforce Investment Act menu option. The fastest method to activate any of the programs is by entering the program's mnemonic (e.g., PWIR) anywhere within the menu environment. After entering the mnemonic, the data entry screen for the applicable mnemonic will appear on the screen. For example, after entering "PWIR", the following data entry screen is displayed:

#### **PWIR—Print WIA Application Form Screen**

PWIR	Print WIA Application Form	
	Retrieve Existing Report, Enter (Y)es or (N)o	N
	App Number	
	Include Signature Block (Y/N)	N

#### **Line Item Instructions**

The following are line item instructions for the print option screen.

Retrieve Existing Report, Enter (Y)es or (N)o (All)	Enter <b>Y</b> if you want to view or print an existing report. Enter <b>N</b> if a new report is to be generated from the JTA system. Default is set to <b>N</b> .
Application Number for PWIR, PWIT, and PWIF	Enter the seven-digit WIA application number for the record you wish to print.
Case Number for PWIE and PWIF	Enter the seven-digit WIA case number for the record you wish to print.
Include Signature Block (PWIR, PWIE, PWIG, and PWIT)	Enter <b>Y</b> if you want the printed form to include a signature block. Default is set to <b>N</b> .
Follow-up Type (PWIF)	Enter the follow-up type if printing the WIA Follow-up Contact Information form.

After all fields have been entered, the record may be filed by using the **<F5> <File>** key.

#### **Function Keys**

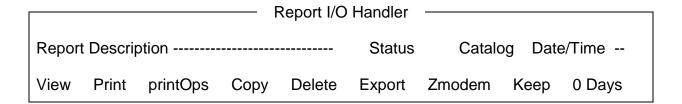
All function keys will operate in the normal mode.

#### **Report Generation**

The program will then generate the report using the entered data. After the report is generated, the Report Setup screen will be displayed on the screen. Enter a name for the report in the Report Description field, the desired number of days to keep the report, and file the report using **<F5> <File>**.

Report Setup —————										
Report Description:	<u>(E</u>	Keep 14 Days								
Print: <b>N</b> printOpts	Run Later: N	Start:	:	Private: N	Owner:					

The Report Input/Output Handler (RIOH) option screen will then be displayed on the screen with the filename displayed in the Report Description field. The report can then be viewed or printed.



To view the report, tab to the "View" option and hit the **<Enter>** key or enter "**V**". The report will be displayed on the screen. To return to the RIOH screen, enter **<F3>**. To print the report, tab to the "Print" option and hit the **<Enter>** key or enter "**P**". To return to the RIOH screen, enter **<F3>**. To exit RIOH, enter **<F3>**.

Before printing the report, ensure that the appropriate printer is selected using the **printOpts** option in RIOH. The PWIR, PWIG, PWIT, and PWIF is in the portrait format. The PWIE is in the landscape format.

#### **Print WIA Application (PWIR) Form Entry Screen**

PWIR	Print WIA Application Form	
	Retrieve Existing Report, Enter (Y)es or (N)o	N
	App Number	
	Include Signature Block (Y/N)	N

#### **PWIR—FORM LAYOUT**

The WIA Application Form will print in the following portrait format:

**PWIR** WORKFORCE APPLICATION FORM MM/DD/YYYY sdaguest HH:MM:SS App Num 1000001 App Date 01-01-2001 SSN 123-45-6789 Agency Code A38 Universal Access Only NO DOE, JANE R. Client Name Address 8585 SUTTER ROAD IONE, CA 95640 Mail Address PO BOX 1333 SUTTER CREEK, CA 95685 Phone 209-267-1996 Message Phone 209-268-1234 GE0 3006 AMADOR Citizen U.S. CITIZEN Alien Doc Gender **FEMALE** Birthdate 10/22/1961 Age 39 YES - WIA ASSESSED Assessed Selective Service Regis NOT REQUIRED 4 WH WHITE - NOT HISPANIC Race1 Race2 Race3 Race4 Race5 Race6 Adult Education NO Rapid Response NO Rapid Resp Addl Asst Job Corps NO NO Farmworker Program NO NO Native American Program NO Food Stamp Training Pgm NO Vet Wrkfrce Inv Pgm NO Limited English NO Veterans/DVOP LVR NO Substance Abuse NO Trade Adjustment Act NO Basic Skills Deficiency NO NAFTAA-TAA NO Offender NO Vocational Education NO Pregnant/Parent Youth NO Yth Needing Assistance Vocational Rehab NO NO Wagner and Peyser NO Runaway Youth NO WtW Participant NO Foster Child NO Title V Activities OAA) Family TANF NO NO Comm Srvc Block Grnt NO Family GA NO **HUD Pgm** NO Family RCA NO Other Non-WIA Pgm Family SSI NO

## **PWIR—FORM LAYOUT (Continued)**

Disabled Family Food Stamps Number in Family	3 3 4	NO NO	
Number of Dependents Family Status Family Income 6 Months	1 2 \$999,999	PARENT IN TWO	PARENT FAMI
Low Income FANF Exhaustee Homeless Poor Work History Unemployment Insurance Veteran Status Disabled Veteran Veteran Sep Date	NO NO NO NO 1 3	YES, UI CLAIMAN NO	Т
Recent Sep Vet Campaign Vet Spouse of Qualifying Vet Highest Grade Completed Education Status	NO 16 4	OOS HS GRAD EN	MPL DFFCULT
Reading Grade Reading Score Reading Test Reading Version Math Grade Math Score Math Test	0.0 299 009 0.0 238 009		
Math Version Pell Grant Recipient	4	APPLICATION NO	T SUBMIT
Pell Grnt Amount Labor Force Status Wks Employed Last 26 Hourly Wage	\$9,999.99 1 00 \$8.75	EMPLOYED	
Referred by WPRS Dislocated Worker Dislocation Date Job Code at Disloc	NO 9 MM/DD/YYYY	NOT APPLICABLE	Ξ
Disloc Industry Code Fenure at Empl. Disl Employer Number Employer Name Employer Address Employer City Employer St Employer Zip	999 0		
Employer Telephone Eligibility nterviewer ID Staff Name Staff ID Reviewer ID	A 1960 SMITH, SAM 1060 JOHNSON, JOHN	ADULT WIA	
Client Certification: My signal understand the information of hat all of the above informat have supplied is subject to tems is grounds for terminat n action to recover any mon	ature below indicates on tained on this formation is true and comples verification. I understation from the Workforc	<ul> <li>I certify under penalete. I agree that any and that falsification e Investment Progra</li> </ul>	alty of perjury information of any
Signature of Client			Date
Signature of Parent, Guardian or Othe	r Responsible Adult		Date
Signature of Interviewer			Date
Signature of Reviewer			Date

### Print WIA Enrollment (PWIE) Form Entry Screen

PWIE Print WIA Enrollment Form

Retrieve Existing Report, Enter (Y)es or (N)o N

Case Number

Include Signature Block (Y/N) N

#### **PWIE—FORM LAYOUT**

The WIA Enrollment Form will print in the following landscape format:

PWIE sdaguest	WORKFORCE INVESTMENT ENROLLMENT FORM est								04/04/2001 14:47					
SSN Case Num Grant Code Grant Desc Enrollment Date Labor Force Status Activities/Services Se	10 20 TIT 12 2	3-45-6789 00000 1 TLE I WIA AE /13/2000	DULT	NAME App Num Agency Code Date ITA Esta Total AMT of I Enrolling Staff Enrolling Staff	blished TA ID	DOE, JOHN R 1002200 AJFP MM/DD/YYYY 99,999.99 6666 LINTON, BILL								
Act Act Cd Name	Agy Cd	Provider Code	Provider Name	Program Code	Program Name		Job Code	Job Desc	Begin Date	Est/End Date	ITA Amt Used	Cmp Cd	GI Cd	Goal Desc
50 AUDLT EDUC	AJFP	12345678	COMP INSTITUTE	11050117190500	COMP NET	WORK SPLST	169167030	MANAGER, DATA	01/08/2001	06/23/2001		NO	001	MATH
Signature			-											
Title			Date											

### **Print WIA Goals (PWIG) Form Entry Screen**

PWIG	Print WIA Goals Form	
	Retrieve Existing Report, Enter (Y)es or (N)o	N
	Case Number	
	Include Signature Block (Y/N)	N

#### PWIG—FORM LAYOUT

#### The WIA Goals Form will print in the following portrait format:

PWIG sdaguest			WOR	KFORCE INVESTME	NT GOALS FORM		04/04/2001 10:47	
Case Num App Num SSN Client Name		100000 100001 123-45- SMITH,	1 6789		Agcy Cd Goals Stat Grnt Cd Grnt Desc		01A 6115 301 301 WIA YT	
Primary Goal	Goal Type	Goal Type Desc	Goal Code	Goal Desc	Date Set	Result Code	Result Desc	Date Attained
YES YES	1 1	BASIC SKLS WRK SKLS	002 009	MATH WRK AWARE	10/02/2000 10/02/2000	2 2	NOT ATTAIN NOT ATTAIN	08/08/2002 08/08/2002
Signature								
Title					Date			

# Print WIA Exit (PWIT) Form Entry Screen

PWIT	Print WIA Exit Form	
	Retrieve Existing Report, Enter (Y)es or (N)o	N
	App Number	
	Include Signature Block (Y/N)	N

#### **PWIT—FORM LAYOUT**

#### The WIA Exit Form will print in the following portrait format:

PWIT sdaguest	WORKFORCE INVESTMENT EXIT FORM		MM/DD/YYYY 11:00	
App Num App Nu	ed Educ NO NO NO NO NO NO NO O7/11/2000 688 WOODS TRUCKING 1777 ELM ST MANTECA MARY JONES 209-344-5566 53303201 TRUCK DRIVER 40.0 9.99 NT YES I 1 TRAINING TO JOB NO NO 4999 SMITH, JAMES	CA	95340-9999	
	Post Exit Services			
Service Code	Description Begin Date End Date			
Signature				
Title	Date			

#### Print WIA Follow-Up (PWIF) Form Entry Screen

PWIF	Print WIA Follow-up Form	
	Retrieve Existing Report, Enter (Y)es or (N)o	N
	App Number	
	Follow-up Type	

#### PWIF—FORM LAYOUT

The WIA Follow-up Form will print in the following portrait format:

 PWIF
 Print WIA Follow-up Form
 04/27/2001

 sdaguest
 14:47:59

 App Num
 4214240

 Client Name
 DOE, JANE

 SSN
 123-45-6789

Agency Code T380 TUOLUMNE COUNTY Follow-up Type 3 1st QUARTER FOLLOW-UP

Follow-up Date 10/10/2000 Interview Date 10/10/2000

Follow-up Result 01 COMPLETE: ALL QUESTIONS Labor Force Status 1 EMPLOYED FULL-TIME Supp Data Emp Qtr1 3 NOT APPLICABLE Supp Data Emp Qtr3 3 NOT APPLICABLE

Date Degree/Certificate 06/27/2000

Type of Degree Attained 5 OCCUPATIONAL SKILLS LICEN

Continuing in Post-Scndry Educ Continuing in Advanced Trng

In Military Service NO
In Qualified Apprenticeship NO
Weeks Employed 8
With Exit Employer YES
Actual Hours Worked 320
Employed at Follow-up YES

Most Recent Employer/Employer at Follow-up

Date Employed 07/11/2000 Employer Number 684

Employer Name JONES TRUCKING Address 7515 ELM ST

City State Zip MANTECA CA 95340-9999

Employer Contact MARY MARTIN
Phone 209-439-0050

Job Code 35330102 TRUCK DRIVER

Hours Per Week 40.0 Hourly Wage \$ 9.00

Follow-up Staff ID 9949 SANDERS, JOAN

Note Taker